

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000013340

**FILED**  
**Mar 20, 2012**  
**Secretary of State**

**Entity Name:** BUENAVISTA MARKETING, LLC

**Current Principal Place of Business:**

2151 S. LE JEUNE ROAD  
202  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

2151 S. LE JEUNE ROAD  
202  
CORAL GABLES, FL 33134

**New Mailing Address:**

**FEI Number:** 27-4723015

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ALVAREZ, NICOLAS R  
2151 S. LE JEUNE ROAD  
202  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

EYLERTS, KIRSTEN  
1205 SW 37 AVENUE  
3RD FLOOR  
MIAMI, FL 33135 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: KIRSTEN EYLERTS

03/20/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: FLORIDA HEALTH INVESTMENTS, LLC  
Address: 2151 S. LE JEUNE ROAD, SUITE 202  
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: NICOLAS R. ALVAREZ

MGRM

03/20/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date