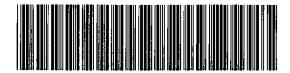
111000040859

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

D. BRUCE

DEC 0 6 2011

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 27, 2011

ANNA R TALERICO 4040 GALT OCEAN DR. FT. LAUDERDALE, FL 33308

SUBJECT: JATARO MEDICAL, LLC Ref. Number: L11000040859

We have received your document for JATARO MEDICAL, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Regulatory Specialist II

FILED

11 DEC -5 M 9: 31,
SECRETARY OF STATE
TALLAHASSEE, FLORIFA

Letter Number: 511A00022293

COVER LETTER



TO: Registration Section Division of Corporations

SUBJECT:

Tataro Medical

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jataro Medical

4040 Galt Ocean Dr.

Ft lauderdale, FL 33308

anna O Jataro. com

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For further information concerning this matter, please call:

Ama Talerico at (954) 607-77/4

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY.

r to change its registered office or registered
aro Medical
: 4040 Galt Ocean DI
Ft lauderdale, FL
sane as above
1 1 1 0 0 0 0 4 0 8 5 9 4. Document number
he records of the Florida Dept. of State: Quit
The company Corporation
27/ Centerville Rd
Willington, DE 19808
V Registered Office address:
Anna R. Talerico
FF Quderdale, FL 33308
was of the State of Florida, it is hereby orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote vise provided in the articles of organization with the articles of organization where to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00