

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000055876

**FILED**  
**Mar 18, 2012**  
**Secretary of State**

**Entity Name:** ORTHO-DOCS CONSULTING, LLC

**Current Principal Place of Business:**

3220 SW 90 AVENUE  
MIAMI, FL 33165 US

**New Principal Place of Business:**

4037 SW 65 AVENUE  
#5  
MIAMI, FL 33155 US

**Current Mailing Address:**

P.O. BOX 260263  
MIAMI, FL 33126 US

**New Mailing Address:**

**FEI Number:** 45-2588074

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RODRIGUEZ, DAILIN  
3220 SW 90 AVENUE  
MIAMI, FL 33165 US

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

RODRIGUEZ, DAILIN  
4037 SW 65 AVENUE  
#5  
MIAMI, FL 33155 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:

03/18/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: RODRIGUEZ, DAILIN  
Address: 4037 SW 65 AVENUE, #5  
City-St-Zip: MIAMI, FL 33155 US

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: DAILIN RODRIGUEZ

MGRM

03/18/2012

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