

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000057342

Entity Name: RE-DEVICE LLC

**FILED**  
**May 08, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

3810 ORANGEPOINTE ROAD  
VALRICO, FL 33594

**New Principal Place of Business:**

730 S DALE MABRY HWY  
TAMPA, FL 33609

**Current Mailing Address:**

4532 WEST KENNEDY BLVD., #495  
TAMPA, FL 33609

**New Mailing Address:**

FEI Number: 61-1649984      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

ORTIZ, SHAINA L  
3810 ORANGEPOINTE ROAD  
VALRICO, FL 33594      US

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

ORTIZ, SHAINA L  
4532 W KENNEDY BLVD  
#495  
TAMPA, FL 33609      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: \_\_\_\_\_

Electronic Signature of Registered Agent

05/08/2012

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ORTIZ, JOHN A  
Address: 4532 W KENNEDY BLVD #495  
City-St-Zip: TAMPA, FL 33609

Title: MGRM  
Name: ORTIZ, SHAINA L  
Address: 4532 W KENNEDY BLVD #495  
City-St-Zip: TAMPA, FL 33609

Title: MGRM  
Name: ORTIZ, JOSHUA A  
Address: 4532 W KENNEDY BLVD #495  
City-St-Zip: TAMPA, FL 33609

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: SHAINA ORTIZ

MGRM

05/08/2012

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