

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000080959

Entity Name: IFORMED, LLC.

FILED
Apr 10, 2012
Secretary of State

Current Principal Place of Business:

5317 N.W. SOUTH LANETT SOUTH CIRCLE
PORT SAINT LUCIE, FL 34986

New Principal Place of Business:

830 SOUTH OCEAN DRIVE
UNIT #1401
HALLANDALE BEACH, FL 33009

Current Mailing Address:

PO.BOX, 13866
FT. PIERCE, FL 34979

New Mailing Address:

FEI Number: 45-2817867

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VELASCO, CARLOS T JR
5317 N.W SOUTH LANETT CIRCLE
PORT SAINT LUCIE, FL 34986 US

Name and Address of New Registered Agent:

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

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: VELASCO, CARLOS T JR
Address: 5317 N.W SOUTH LANETT CIRCLE
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: MGRM
Name: GROVES, RACHEL M
Address: 5317 N.W SOUTH LANETT CIRCLE
City-St-Zip: PORT SAINT LUCIE, FL 34986

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: CARLOS T. VELASCO JR

MGRM

04/10/2012

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