

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# M06000006018

**FILED**  
**Oct 03, 2010**  
**Secretary of State**

**Entity Name:** MEDICAL INTUITION TECHNOLOGIES, LLC

**Current Principal Place of Business:**

510 VONDERBURG DRIVE  
SUITE 202  
BRANDON, FL 33511

**New Principal Place of Business:**

**Current Mailing Address:**

510 VONDERBURG DRIVE  
SUITE 202  
BRANDON, FL 33511

**New Mailing Address:**

**FEI Number:** 51-0565901

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOOHOFF, ALEKSEY  
510 VONDERBURG DRIVE  
SUITE 202  
BRANDON, FL 33511 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:** REGISTERED AGENT SIGNATURE

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** BOOHOFF, ALEKSEY  
**Address:** 3934 CEDAR CAY CIRCLE  
**City-St-Zip:** VALRICO, FL 33596

**Title:** MGR  
**Name:** KONYAYEV, DMITRIY  
**Address:** 3901 CEDAR CAY CIRCLE  
**City-St-Zip:** VALRICO, FL 33596

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:** ALEKSEY BOOHOFF

CEO

10/03/2010

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