## 2010 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# M09000001738

Entity Name: VITAMEDMD, LLC

**FILED** Dec 02, 2010 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

6501 CONGRESS AVE THIRD FLOOR 951 BROKEN SOUND PKWY NW BOCA RATON, FL 33487

STE 320

BOCA RATON, FL 33487

**Current Mailing Address: New Mailing Address:** 

6501 CONGRESS AVE THIRD FLOOR 951 BROKEN SOUND PKWY NW BOCA RATON, FL 33487

STE 320 BOCA RATON, FL 33487

FEI Number: 26-2704476 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

FINIZIO, ROBERT 6501 CÓNGRESS AVE THIRD FLOOR BOCA RATON, FL 33487

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: ROBERT FINIZIO

Electronic Signature of Registered Agent Date

## **MANAGING MEMBERS/MANAGERS:**

FINIZIO, ROBERT Name:

Address: 951 BROKEN SOUND PKWY STE 320

City-St-Zip: BOCA RATON, FL 33487

Title: MGR

Name: BERNICK, BRIAN

951 BROKEN SOUND PKWY STE 320 Address:

City-St-Zip: BOCA RATON, FL 33487

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 Statues.

SIGNATURE: ROBERT FINIZIO MEM 12/02/2010