

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M11000002991

FILED
Apr 03, 2012
Secretary of State

Entity Name: REPRODUCTIVE MEDICINE INSTITUTE IVF, LLC

Current Principal Place of Business:

258 S. CHICKASAW TRAIL, SUITE 310
ORLANDO, FL 32825

New Principal Place of Business:

Current Mailing Address:

258 S. CHICKASAW TRAIL, SUITE 310
ORLANDO, FL 32825

New Mailing Address:

FEI Number: 38-3845404

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HEINKEL, DAVID D
258 S. CHICKASAW TRAIL, SUITE 310
ORLANDO, FL 32825 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: MGR
Name: GOMEZ, FERNANDO L M.D.
Address: 258 SOUTH CHICKASAW TRAIL, SUITE 310
City-St-Zip: ORLANDO, FL 32825

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: FERNANDO L. GOMEZ, MD

MGR

04/03/2012

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