

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M11000004007

FILED
May 01, 2012
Secretary of State

Entity Name: CYPRESS HEALTH GROUP, LLC

Current Principal Place of Business:

4 WEST RED OAK LANE, STE. 201
WHITE PLAINS, NY 10604

New Principal Place of Business:

Current Mailing Address:

4 WEST RED OAK LANE, STE. 201
WHITE PLAINS, NY 10604

New Mailing Address:

FEI Number: 27-2914761

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC.
155 OFFICE PLAZA DRIVE, STE. A
TALLAHASSEE, FL 32301 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: CYPRESS MASTER HOLDINGS, LLC
Address: 4 WEST RED OAK LANE, STE. 201
City-St-Zip: WHITE PLAINS, NY 10604

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: CYPRESS MASTER HOLDINGS, LLC

MGR

05/01/2012

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