2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 08, 2014
Secretary of State
CC5538687089

DOCUMENT# L00000009343

Entity Name: IBS PHARMA, LLC

Current Principal Place of Business:

3200 WEST END AVE
SUITE 500
NASHVILLE, TN 37203

Current Mailing Address:

3200 WEST END AVE
SUITE 500
NASHVILLE, TN 37203 US

FEI Number: 26-3545235

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHITRIK, LEAH
6400 CONGRESS AVE
SUITE 1400
BOCA RATON, FL 33487 US

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

Authorized Person(s) Detail :

Title	MS
Name	CHITRIK, LEAH
Address	3200 WEST END AVE, STE 500
City-State-Zip:	NASHVILLE TN 37203

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LEAH CHITRIK OWNER 01/08/2014

Electronic Signature of Signing Authorized Person(s) Detail — Date