

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000028801

Entity Name: STEEDE MEDICAL LLC

Current Principal Place of Business:

11433 NW 34TH STREET
DORAL, FL 33178

Current Mailing Address:

11433 NW 34TH STREET
DORAL, FL 33178 US

FEI Number: 20-1399388

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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	MGRM	Title	MGRM
Name	STEEDE, LOUIS L C	Name	STEEDE, ELENA D
Address	11433 NW 34TH STREET	Address	11433 NW 34TH STREET
City-State-Zip:	DORAL FL 33178	City-State-Zip:	DORAL FL 33178

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LOUIS L C STEEDE

MGRM

02/13/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date