2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 27, 2013
Secretary of State
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Entity Name: CRITICAL CARE MEDICINE, LLC

Current Principal Place of Business:

3663 SOUTH MIAMI AVENUE., SUITE 3325
MIAMI, FL 33133

Current Mailing Address:

6200 SW 106 STREET
MIAMI, FL 33129

FEI Number: 27-4532983

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MOAS, RAUL
3659 SOUTH MIAMI AVENUE
SUITE 5004
MIAMI, FL 33133 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	MOAS, RAUL	Name	MOAS, CARLOS
Address	3659 SOUTH MIAMI AVENUE, SUITE 5004	Address	3659 SOUTH MIAMI AVENUE
City-State-Zip:	MIAMI FL 33133	City-State-Zip:	MIAMI FL 33133

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: RAUL MOAS MGRM 01/27/2013

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