

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000042245

**Entity Name:** CONTINUE HEALTHCARE, L.L.C.

**Current Principal Place of Business:**

833 N. HOMESTEAD BLVD.  
HOMESTEAD, FL 33030

**Current Mailing Address:**

3400 CORAL WAY  
5TH FL  
MIAMI, FL 33145

**FEI Number:** 45-1563652

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DE VERA, JOSEPH N ESQ.  
3400 CORAL WAY  
5TH FLOOR  
MIAMI, FL 33145 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:** JOSEPH DE VERA

04/02/2013

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name MANAGED HEALTHCARE PARTNERS,  
LLC  
Address 3400 CORAL WAY, 5TH FLOOR  
City-State-Zip: MIAMI FL 33145

*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:** JOSEPH DE VERA

MGRM

04/02/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date