## 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000131186

Entity Name: OPKO OURLAB, LLC

**Current Principal Place of Business:** 

4400 BISCAYNE BLVD. MIAMI, FL 33137

## **Current Mailing Address:**

4400 BISCAYNE BLVD. MIAMI, FL 33137

FEI Number: 46-1243198 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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

FILED Mar 26, 2013

**Secretary of State** 

CC6779790245

## Authorized Person(s) Detail:

Title MANAGING MEMBER
Name OPKO HEALTH, INC.
Address 4400 BISCAYNE BLVD.

City-State-Zip: MIAMI FL 33137

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: ADAM LOGAL TREASURER 03/26/2013