

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000001969

Entity Name: PORTFOLIO MEDICS, LLC

Current Principal Place of Business:

27499 RIVERVIEW CENTER BLVD
SUITE 406
BONITA SPRINGS, FL 34134

Current Mailing Address:

27499 RIVERVIEW CENTER BLVD
SUITE 406
BONITA SPRINGS, FL 34134 US

FEI Number: 41-2262390

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CONRATH, JOHN
27499 RIVERVIEW CENTER BLVD
SUITE 406
BONITA SPRINGS, FL 34134 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
Name CONRATH, JOHN
Address 27499 RIVERVIEW CENTER BLVD
SUITE 406
City-State-Zip: BONITA SPRINGS FL 34134

Title MGRM
Name BILLY, JOHN JR
Address 27499 RIVERVIEW CENTER BLVD
SUITE 406
City-State-Zip: BONITA SPRINGS FL 34134

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: JOHN C CONRATH

MGRM

04/01/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date