

2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Feb 01, 2013
Secretary of State
CC7990045796

Entity Name: GEMINO HEALTHCARE FINANCE, LLC

Current Principal Place of Business:

1 INTERNATIONAL PLAZA, SUITE 220
PHILADELPHIA, PA 19113

Current Mailing Address:

1 INTERNATIONAL PLAZA, SUITE 220
PHILADELPHIA, PA 19113

FEI Number: 20-8317717

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

Authorized Person(s) Detail :

Title MGRM
Name SCHNEIDER, TOM
Address 1 INTERNATIONAL PLAZA, SUITE 220
City-State-Zip: PHILADELPHIA PA 19113

Title MGRM
Name GERVAIS, MIKE
Address 1 INTERNATIONAL PLAZA, SUITE 220
City-State-Zip: PHILADELPHIA PA 19113

Title MGRM
Name ROSCIOLI, MARK
Address 1 INTERNATIONAL PLAZA, SUITE 220
City-State-Zip: PHILADELPHIA PA 19113

Title MGRM
Name ALLEN, STACY
Address 1 INTERNATIONAL PLAZA, SUITE 220
City-State-Zip: PHILADELPHIA PA 19113

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: MARK ROSCIOLI

CFO

02/01/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date