

2004 LIMITED LIABILITY COMPANY REINSTATEMENT

**FILED
Oct 19, 2004
Secretary of State**

DOCUMENT# L03000015377

Entity Name: CHICKSAW MEDICAL PLAZA, L.L.C.

Current Principal Place of Business:

7824 LAKE UNDERHILL RD # H&I
ORLANDO, FL 32822

New Principal Place of Business:

Current Mailing Address:

7824 LAKE UNDERHILL RD # H&I
ORLANDO, FL 32822

New Mailing Address:

7824 LAKE UNDERHILL RD # I
ORLANDO, FL 32822

FEI Number: 75-3114227

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAPAAH, MICHAEL K
7824 LAKE UNDERHILL RD # I
ORLANDO, FL 32822 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MEMBERS:

Title: MGMR () Delete
Name: DAPAAH, MICHAEL K
Address: 7824 LAKE UNDERHILL RD # I
City-St-Zip: ORLANDO, FL 32822

Title: MGMR () Delete
Name: KING, SYLLETTE
Address: 7824 LAKE UNDERHILL RD # H
City-St-Zip: ORLANDO, FL 32822

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DAPAAH, MICHAEL K
Address: 7824 LAKE UNDERHILL RD # I
City-St-Zip: ORLANDO, FL 32822

Title: MGRM (X) Change () Addition
Name: KING, SYLLETTE
Address: 7824 LAKE UNDERHILL RD # H
City-St-Zip: ORLANDO, FL 32822

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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.

SIGNATURE: MICHAEL DAPAAH

MGRM

10/19/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date