

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000116127

FILED
Oct 05, 2007
Secretary of State

Entity Name: JORDAN BROOKE'S ASSISTED LIVING, LLC

Current Principal Place of Business:

4508 VAN BUREN STREET
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

6486 SW 26 STREET
MIRAMAR, FL 33023

New Mailing Address:

FEI Number: 20-8010340 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

PERICLES, LOUCASADA N P
6486 SW 26 STREET
MIRAMAR, FL 33021 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: LOUCASADA N PERICLES

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: P () Delete
Name: PERICLES, LOUCASADA N
Address: 6486 SW 26 STREET
City-St-Zip: MIRAMAR, FL 33023 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Delete
Name: PERICLES, FRED
Address: 6486 SW 26 STREET
City-St-Zip: MIRAMAR, FL 33023 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LOUCASADA N PERICLES

P

10/05/2007

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