

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000101288

FILED
Apr 24, 2009
Secretary of State

Entity Name: CENTER OF TRANQUILITY, LLC

Current Principal Place of Business:

402 E PALM AVENUE
TAMPA, FL 33602

New Principal Place of Business:

310 EAST OAK AVENUE
TAMPA, FL 33602

Current Mailing Address:

402 E PALM AVENUE
TAMPA, FL 33602

New Mailing Address:

310 EAST OAK AVENUE
TAMPA, FL 33602

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

ELLIS, GED, DOLMAN & BERMAN, P.A.
800 COURT STREET
CLEARWATER, FL FL 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: ELLIS DOLMAN

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: STEWART, JONI C
Address: 402 E. PALM AVENUE
City-St-Zip: TAMPA, FL 33602

Title: MGRM (X) Change () Addition
Name: STEWART, JONI C
Address: 310 EAST OAK AVENUE
City-St-Zip: TAMPA, FL 33602

Title: MGRM () Delete
Name: CAVALL, COURTNEY
Address: 402 E. PALM AVENUE
City-St-Zip: TAMPA, FL 33602

Title: MGRM (X) Change () Addition
Name: CAVALL, COURTNEY
Address: 310 EAST OAK AVENUE
City-St-Zip: TAMPA, FL 33602

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: COURTNEY CAVALL

MS

04/24/2009

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