

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000124574

**FILED**  
**Apr 12, 2009**  
**Secretary of State**

**Entity Name:** FIRST COAST ULTRASOUND, LLC

**Current Principal Place of Business:**

6221 GRAVES ST.  
JACKSONVILLE, FL 32210 US

**New Principal Place of Business:**

6320 ST. AUGUSTINE RD.  
UNITS 12 A & B  
JACKSONVILLE, FL 32217 US

**Current Mailing Address:**

6221 GRAVES ST.  
JACKSONVILLE, FL 32210 US

**New Mailing Address:**

1905 SPOONBILL ST.  
JACKSONVILLE, FL 32224 US

FEI Number: 26-1595810

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ERWIN, FOUNTAIN AND JACKSON, PA  
8762 PERIMETER PARK BLVD.  
JACKSONVILLE, FL 32216 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: DONALD FOUNTAIN

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: CEO ( ) Delete  
Name: WADE, SCOTT E  
Address: 6221 GRAVES ST.  
City-St-Zip: JACKSONVILLE, FL 32210 US

**ADDITIONS/CHANGES:**

Title: CEO (X) Change ( ) Addition  
Name: WADE, SCOTT E  
Address: 1905 SPOONBILL ST.  
City-St-Zip: JACKSONVILLE, FL 32224 US

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: SCOTT E. WADE

CEO

04/12/2009

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