2012 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 17, 2012
Secretary of State

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Entity Name: PERSONALIZED PSYCHIATRY, LLC

Current Principal Place of Business:

13902 N. DALE MABRY HWY, STE. 134
TAMPA, FL 33618

New Principal Place of Business:

Current Mailing Address:

13902 N. DALE MABRY HWY, STE. 134
TAMPA, FL 33618

New Mailing Address:

FEI Number: 45-2603732 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GETTES, RUTH DR.
13902 N. DALE MABRY HWY, STE. 134
TAMPA, FL 33618 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: RUTH GETTES

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: GETTES, RUTH DR.
Address: 13902 N. DALE MABRY HWY, STE. 134
City-St-Zip: TAMPA, FL 33618

Title: DR
Name: HOWARD, TUCH
Address: 13902 N. DALE MABRY STE 134
City-St-Zip: TAMPA, FL 33618

I hereby 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 Statues.

SIGNATURE: RUTH GETTES MGMR 10/17/2012

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