2014 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 05, 2014
Secretary of State

DOCUMENT# L11000071890

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:

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

Current Mailing Address:

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

New Mailing Address:

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

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:

GETTES, RUTH DR.
13902 N. DALE MABRY HWY
STE 134
TAMPA, FL 33618 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: RUTH GETTES, MD 10/05/2014
Electronic Signature of Registered Agent Date

AUTHORIZED PERSONS:

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

Title: MR
Name: ALEXANDER, 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 authorized to execute this report as required by Chapter 605, Florida Statues.

SIGNATURE: RUTH GETTES OP 10/05/2014
Electronic Signature of Authorized Person Date