2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000079106

Entity Name: 150 CHAMBER COURT, SUITE 203, PSL, LLC

FILED Oct 06, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

150 CHAMBER COURT, STE 203 150 CHAMBER COURT PORT ST. LUCIE, FL 34986

SUITE 203

PORT ST. LUCIE, FL 34986

Current Mailing Address: New Mailing Address:

150 CHAMBER COURT, STE 203 150 CHAMBER COURT

PORT ST. LUCIE, FL 34986 SUITE 203

PORT ST. LUCIE, FL 34986

FEI Number: 20-5221390 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:

SUEN, JOHN S M.D. SUEN, JOHN S M.D. 150 CHAMBER COURT 150 CHAMBER COURT, STE 203

PORT ST. LUCIE, FL 34986 SUITE 203

PORT ST. LUCIE, FL 34986 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: JOHN S SUEN

10/06/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM () Delete Title: () Change () Addition

SUEN, JOHN S M.D. Name: Name: Address: 150 CHAMBER COURT, STE 203 Address: City-St-Zip: PORT ST. LUCIE, FL 34986 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: JOHN S SUEN **MGRM** 10/06/2006