

2016 FLORIDA PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P15000038550

**FILED
Oct 31, 2016
Secretary of State
CR8756042567**

Entity Name: INSTITUTE OF REHABILITATION EDUCATION AND TRAINING, INC.

Current Principal Place of Business:

14260 WEST NEWBERRY ROAD
#239
NEWBERRY, FL 32669

Current Mailing Address:

14260 WEST NEWBERRY ROAD
#239
NEWBERRY, FL 32669 US

FEI Number: 47-3479364

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

POMERANZ, JAMIE L
14260 WEST NEWBERRY ROAD
#239
NEWBERRY, FL 32669 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: JAMIE POMERANZ

10/31/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO
Name POMERANZ, JAMIE L
Address 13117 SW 6TH AVE
City-State-Zip: NEWBERRY FL 32669

Title CFO
Name YU, NAMI
Address 10827 NW 18TH COURT
City-State-Zip: GAINESVILLE FL 32606

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: NAMI YU

CFO

10/31/2016

Electronic Signature of Signing Officer/Director Detail

Date