Current Ma	iling Address:			
6791 49TH PINELLAS F	STREET N PARK, FL 33781 US			
FEI Number: 90-0621446			Certificate of Status Desired: Yes	
Name and Address of Current Registered Agent:				
BOUNEMANY, 6791 49TH STI PINELLAS PAF				
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: VIENGKEO BOUNEMANY				01/09/2014
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	CEO	Title	VP	
Name	BOUNEMANY, VIENGKEO	Name	PHAY, CHANTHOU	
Address	6791 49TH STREET N	Address	6791 49TH STREET N	

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: VIENGKEO BOUNEMANY

CEO

01/09/2014

Entity Name: SIMONE HEALTH CARE, LLC

## Current Principal Place of Business:

6791 49TH STREET N PINELLAS PARK, FL 33781

## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L10000105708

Electronic Signature of Signing Authorized Person(s) Detail

Date

## FILED Jan 09, 2014 Secretary of State CC6391927176