

**2017 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L15000177494

**Entity Name:** HEALTHSTONE CARE CENTER 1, LLC

**Current Principal Place of Business:**

3700 WASHINGTON STREET, STE 305  
HOLLYWOOD, FL 33021

**Current Mailing Address:**

3700 WASHINGTON STREET, STE 305  
HOLLYWOOD, FL 33021 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

STONE, CHARLES MD  
8030 PETERS ROAD, SUITE D-104  
PLANTATION, FL 33324 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:** CHARLES STONE

01/25/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name STONE, CHARLES MD  
Address 3700 WASHINGTON STREET, STE 305  
  
City-State-Zip: HOLLYWOOD FL 33021

*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:** CHARLES STONE

MANAGER

01/25/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date