

**2019 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L18000136769

**FILED**  
**Oct 16, 2019**  
**Secretary of State**  
**3689098772CR**

**Entity Name:** FORENA MEDICAL GROUP, LLC

**Current Principal Place of Business:**

210 S FEDERAL HWY  
SUITE 402  
HOLLYWOOD, FL 33020

**Current Mailing Address:**

210 S FEDERAL HWY  
SUITE 402  
HOLLYWOOD, FL 33020

**FEI Number:** 83-2063635

**Certificate of Status Desired:** Yes

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

BABINS, JACOB W  
210 S FEDERAL HWY  
SUITE 402  
HOLLYWOOD, FL 33020 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:** JACOB BABINS

10/16/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name GRNJA, MARK  
Address 210 S FEDERAL HWY  
City-State-Zip: SUITE 402 FL 33020

Title AMBR  
Name SOFFER, ARIEL  
Address 210 S FEDERAL HWY  
City-State-Zip: SUITE 402 FL 33020

Title AMBR  
Name BABINS, JACOB  
Address 210 S FEDERAL HWY  
City-State-Zip: SUITE 402 FL 33020

*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:** MARK GRNJA

**MANAGER**

10/16/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date