## 2019 FOREIGN LIMITED LIABILITY COMPANY REINSTATEMENT

### DOCUMENT# M1500000905

Entity Name: BLUE RIDGE HEALTHCARE LLC

## **Current Principal Place of Business:**

1351 SAWGRASS CORPORATE PARKWAY SUITE 100 SUNRISE, FL 33323

# **Current Mailing Address:**

1351 SAWGRASS CORPORATE PARKWAY SUITE 100 SUNRISE, FL 33323 US

## FEI Number: 47-3407001

### Name and Address of Current Registered Agent:

SYMMETRY HEALTHCARE MANAGEMENT, LLC 1351 SAWGRASS CORPORATE PARKWAY SUITE 100 SUNRISE, FL 33323 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:	LEVI RUDD	04	4/10/2019
	Electronic Signature of Registered Agent		Date

### Authorized Person(s) Detail :

Title	MGR
Name	RUDD, LEVI Y
Address	1351 SAWGRASS CORPORATE PARKWAY SUITE 100
City-State-Zip:	SUNRISE FL 33323

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.

OFFICER

SIGNATURE: LEVI RUDD

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

04/10/2019 Date