

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F06000006848

Entity Name: RENALAB, INC.

FILED
Oct 19, 2009
Secretary of State

Current Principal Place of Business:

197 INTERSTATE DRIVE
RICHLAND, MS 39218

New Principal Place of Business:

Current Mailing Address:

115 EAST PARK DR.
SUITE 300
BRENTWOOD, TN 37027

New Mailing Address:

FEI Number: 62-1694655 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: JENNIFER AULTMAN

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEOP () Delete
Name: KLEIN, MICHAEL O
Address: 115 EAT PARK DR STE. 300
City-St-Zip: BRENTWOOD, TN 37027

Title: CFO () Delete
Name: CRAWFORD, JOHN K
Address: 115 EAST PARK DR STE. 300
City-St-Zip: BRENTWOOD, TN 37027

Title: COO () Delete
Name: WEILAND, DEAN
Address: 115 EAST PARK DR STE. 300
City-St-Zip: BRENTWOOD, TN 37027

Title: S () Delete
Name: SUNDOK, JON M
Address: 115 EAST PARK DR. STE. 300
City-St-Zip: BRENTWOOD, TN 37027

Title: D () Delete
Name: MACKESY, SCOTT D
Address: 115 EAST PARK DR STE. 300
City-St-Zip: BRENTWOOD, TN 37027

Title: D () Delete
Name: TRAYNOR, SEAN
Address: 115 EAST PARK DR. STE. 300
City-St-Zip: BRENTWOOD, TN 37027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JON M. SUNDOK

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10/19/2009

Electronic Signature of Signing Officer or Director

Date