2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F07000001930

Entity Name: BEST DOCTORS, INC.

FILED Oct 10, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

ONE BOSTON PLACE 32ND FLOOR 100 FEDERAL STREET 21ST FLOOR BOSTON, MA 02108

BOSTON, MA 02110

Current Mailing Address: New Mailing Address:

ONE BOSTON PLACE 32ND FLOOR 100 FEDERAL STREET 21ST FLOOR

BOSTON, MA 02108 BOSTON, MA 02110

FEI Number: 04-2908444 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SALCES, LESTER 5301 BLÚE LAGOON DRIVE MIAMI, FL 33126

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: LESTER SALCES

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

Name: FALCHUK, EVAN

100 FEDERAL STREET 21ST FLOOR Address:

City-St-Zip: BOSTON, MA 02110

Title:

Name: FALCHUK KENNETH

100 FEDERAL STREET 21ST FLOOR Address:

BOSTON, MA 02110 City-St-Zip:

Title:

VARVARIS, JOHN Name:

100 FEDERAL STREET 21ST FLOOR Address:

City-St-Zip: BOSTON, MA 02110

Title:

HALPERIN, JOSE Name:

Address: 100 FEDERAL STREET 21ST FLOOR

City-St-Zip: BOSTON, MA 02110

Title:

Name: SCHUSTER, REBECCA

100 FEDERAL STREET 21ST FLOOR Address:

City-St-Zip: BOSTON, MA 02110

Title: DCEO

Name: SELIGMAN, DAVID

100 FEDERAL STREET 21ST FLOOR Address:

City-St-Zip: BOSTON, MA 02110

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 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 all other like empowered.

SIGNATURE: REBECCA SCHUSTER S 10/10/2011