PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		S	FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED O1 NOV 16 PM 5: 50 SECRETARY OF STATE		
DOCUMENT # F 9 3 DOOD D 44 5 8 1. Corporation Name					SECRETARY OF STATE TALLAHASSEE, FLORIDA		
Joyner	Sportsmedicine Institute, I	nc.					
,			ce Address Gettysburg Road		700004693927 -11/26/0101083020 ****758,75 *****758.7		
Suite, Apt. #, etc. Suite, Apt. #			tc.				
4th Floor 4th Floor			4. Date		orporated or Qualified usiness in Florida 10/04/	1000	
City & State City & S Mechanicsburg PA Mech					ber 896	1993	Applied For
Zip	Country	Zip	Country	/6		CO 75 A	Not Applicable
17055	USA	17055	USA	CERTIFICA	TE OF STATUS DESIRED	for a C	ditional Fee required ertificate of Status
Signature o Registered	Suite, Apt. #, Etc. City Plantation appointed the registered agent of the Agent Agent Bayana And Street Addresses of Each Office	ne above named corporate Onaice REGISTERED AGE	ion, am familiar with and accept Bryan Special A	Asst Secy.	State Zip Code FL 133324 Ion 607.0505 or 617.0503, I		1000 L
Titles	Name of Officers and/or Di		Street Address of Each Officer and/or Director		City / State / Zip		
Dir.	Rocco A. Ortenzio		4716 Old Gettysburg Road		Mechanicsburg	PA	17055
res.	Robert A. Ortenzio		4716 Old Gettysburg Road		Mechanicsburg	PA	17055
P/Sec	Michael E. Tarvin	4	716 Old Gettysburg Roa	d	Mechanicsburg	PA	17055
P/Trea	Scott A. Romberger	4	716 Old Gettysburg Roa	d	Mechanicsburg	PA	17055
Р	Staci Rhodes Shelley	4	716 Old Gettysburg Roa	d	Mechanicsburg	PA	17055
/P	Kenneth L. Moore		716 Old Gettysburg Roa	ıd	Mechanicsburg	PA	17055
owed b	y that I am an officer or director or the natatement application, the reason by the corporation have been paid an application is true and accurate, and	tor dissolution has been (nd the names of individua	eliminated, the corporate name s is listed on this form do not qualif	atisfies the requirement of for an exemption und	apter 607 or 617, F.S. I furt	her certify t	that when filing

11/15/01 717-972-1132 Date Daytime Phone #

SIGNATURE: Twedard & Tun_ Michael E. Tarvin,
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR VICE Pres.