## 2013 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# H51208

Entity Name: ALLIED HEALTH CARE CORPORATION

FILED Oct 15, 2013 Secretary of State

Current Principal Place of Business:

**New Principal Place of Business:** 

2700 W CYPRESS CREEK ROAD SUITE B-100 FT.LAUDERDALE, FL 33309

Current Mailing Address: New Mailing Address:

2700 W CYPRESS CREEK ROAD 3105 SOUTH MERIDIAN AVE SUITE B-100 OKLAHOMA CITY, OK 73119 FT.LAUDERDALE, FL 33309

FEI Number: 59-2543088 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

CAPITAL CONNECTION, INC
417 E VIRGINIA ST
TALLAHASSEE, FL 32301 US

LIVERPOOL, RONALD
2700 WEST CYPRESS CREEK RD
B-100
FORT LAUDERDALE, FL 33309 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: RONALD LIVERPOOL 10/15/2013

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: [

Name: CARTER, STAN
Address: 3105 SOUTH MERIDIAN
City-St-Zip: OKLAHOMA CITY, OK 73119

Title: D

Name: CARTER, BRAD
Address: 3105 SOUTH MERIDIAN
City-St-Zip: OKLAHOMA CITY, OK 73119

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: BRAD CARTER D 10/15/2013