2014 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# H56893

Entity Name: BEST OF CARE MEDICAL SERVICES, INC.

FILED Sep 30, 2014 Secretary of State

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

36 N.E. 2ND AVENUE 2124 NORTHWEST 102 TERRACE DEERFIELD BEACH, FL 33441 CORAL SPRINGS, FL 333071

Current Mailing Address: New Mailing Address:

2124 NW 102ND TERRACE CORAL SPRINGS, FL 33071

FEI Number: 59-2537203 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:

GOMBERG, ARTHUR A DR
36 N.E. 2ND AVENUE
DEERFIELD BEACH, FL 33441 US
GOMBERG, ARTHUR A DR
2124 NORTHWEST 102 TERRACE
CORAL SPRINGS, FL 33071 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: ARTHUR GOMBERG 09/30/2014

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PRES

 Name:
 GOMBERG, ARTHUR A DR

 Address:
 2124 NORTHWEST 102 TERRACE

 City-St-Zip:
 CORAL SPRINGS, FL 33071

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: ARTHUR GOMBERG P 09/30/2014