

2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# J24024

Entity Name: ABLE HEALTHCARE SERVICES OF LEE, INC.

FILED
Jul 16, 2010
Secretary of State

Current Principal Place of Business:

6226 PRESIDENTIAL CT
SUITE A
FT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

6226 PRESIDENTIAL CT
SUITE A
FT MYERS, FL 33919

New Mailing Address:

FEI Number: 59-2709856 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TUFFY, ROBERT F
12362 ROCK RIDGE LANE
FORT MYERS, FL 33913 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: ROBERT F. TUFFY

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: TUFFY, ROBERT F PRES
Address: 12362 ROCK RIDGE LANE
City-St-Zip: FT MYERS, FL 33913

Title: VD
Name: TUFFY, ROBERT F.
Address: 12362 ROCK RIDGE LANE
City-St-Zip: FT. MYERS, FL 33913

Title: SD
Name: TUFFY, HELEN C.
Address: 12362 ROCK RIDGE LANE
City-St-Zip: FT. MYERS, FL 33913

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: ROBERT F TUFFY

Electronic Signature of Signing Officer or Director

PRES

07/16/2010

Date