

2004 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L00000001560

FILED
Oct 25, 2004
Secretary of State

Entity Name: ACTIVE SPINE CENTERS, LLC

Current Principal Place of Business:

835 EAST 10TH AVE.
HIALEAH, FL 33010

New Principal Place of Business:

Current Mailing Address:

835 EAST 10TH AVE.
HIALEAH, FL 33010

New Mailing Address:

111 MAJORCA AVENUE
CORAL GABLES, FL 33134

FEI Number: 65-0985209 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SCHOLZ, KEVIN
4321 SW 14 ST
MIAMI, FL 33134 US

Name and Address of New Registered Agent:

SCHOLZ, KEVIN
111 MAJORCA AVENUE
CORAL GABLES, FL 33134 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: KEVIN SCHOLZ

10/25/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: PVST () Delete
Name: SCHOLZ, MICHAEL
Address: 4321 SW 14 ST
City-St-Zip: MIAMI, FL 33134

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SCHOLZ, KEVIN
Address: 111 MAJORCA AVENUE
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KEVIN SCHOLZ

MGR

10/25/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date