DOCUMENT # L00000015304		

1. Entity Name

ACCURATE LEGAL NURSE CON	ISULTANTS.	LLC
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Principal Plac	e of Business		Mailing Address					03 SEP 2	9 AM o		
946 WINDING OAKS DRIVE 946 WINDING OAKS DRIVE PALM HARBOR FL 34683 PALM HARBOR FL 34683			7A	ECAL TAR LLAHASE	7.01 Si	: 07 2.					
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2. Principal P	lace of Business		3. Mailing Address				1 (88)(1	IN DIL TANI PANI DA) 	e i is idi dia 1 isida 1	1811) 0191 1884
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State	e		City & State				4. FEI Num	nber 59-36 8	35704		Applied For Not Applicable
Zip	(Country	Zip	Coun	try		5. Certifica	ite of Status Des	sired 🔲	\$5.00 A	
	6. Name and	Address of Current Re	gistered Agent				.7Name ai	nd Address of	New Register	red Agent	٠
COLI	MCI SVEDET	T D 888	`.		Name	Bruc	= Ev	rerett a	Schne		
	nell, everet Winding oak				Street A	ddress (P.	O. Box Num	ber is Not Acce	ptable)		
	HARBOR FL					746	Wind	ding OA	VS DRI	<u>ve</u>	
					City	0.		// /		™ ∎ Zin Co	de 👡
					'	Paln		texpor		FL B	
	named entity su ions of registered		ne purpose of changing its	registere	ed office or	registere	d agent, or b	ooth, in the State	of Florida.	am familiar with	n, and accept
ŭ	·	use Everett	t Schnell				٠		9/27	<i>4</i> 63	
SIGNATURE .	Signature, weed or pr	nted name of registered agent and	title if applicable. (NOTE	E: Registered	d Agent signat	ure required w	when reinstating)		OA.	i€	
			FILE NO	OW!!! F	FEE IS \$	50.00					
			Make Check Payabl		-		t of State				
			Due By	Septer	nber 24,	2003					
9.		MANAGING MEMBERS		10.				ADDIT	IONS/CHAN		
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CITY-ST-ZIP				CITY	-ST-ZIP						
11 I hereby o	partify that the inf	ormation eupplied with th	is filing does not qualify for	the ever	motion eta	ted in Sec	tion 119.07(3)(i) Florida Sta	tutes I further	r certify that the	information

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatic indicated on this report is true and accurate and that my 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:

GNATURE LEGGIRED

9/24/03