2008 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 24, 2008
Secretary of State

DOCUMENT# L00000015513

Entity Name: CARECORP, LLC

Current Principal Place of Business:

5600 N. FLAGLER DR.
SUITE PH204
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

5600 N. FLAGLER DR.
SUITE PH204
WEST PALM BEACH, FL 33407

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:

SNOW, CORTLANDT P
5600 N. FLAGLER DR.
SUITE PH204
WEST PALM BEACH, FL 33407 US

Name and Address of New Registered Agent:

SHOFSTALL, WILLIAM G
828 SQUIRE DRIVE
WELLINGTON, FL 33407 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: WILLIAM G. SHOFSTALL 10/24/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: SNOW, CORTLANDT P
Address: 5600 N. FLAGLER DR., SUITE PH204
City-St-Zip: WEST PALM BEACH, FL 33407

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CORTLANDT P. SNOW MGRM 10/24/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date