2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L00000016281

Entity Name: CORPORATE HEALTH GROUP, LLC

FILED Oct 02, 2007 Secretary of State

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

799 GALIANO ST. 201 N. US HIGHWAY 1 CORAL GABLES, FL 33134

SUITE C6

JUPITER, FL 33477

Current Mailing Address: New Mailing Address:

201 N. US HIGHWAY 1 799 GALIANO ST. SUITE C6 **SUITE 1600**

CORAL GABLES, FL 33134 JUPITER, FL 33477

FEI Number: 65-1072243 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JACKSON, WILLIAM GOLDSMITH, JEFF 799 GALIANO ST. 201 N. US HIGHWAY 1 CORAL GABLES, FL 33134 US SUITE C6

JUPITER, FL 33477 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: JEFF GOLDSMITH 10/02/2007

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition () Delete

JACKSON, WILLIAM H FINKIN, JON Name: Name: Address: 4545 N PINE ISLAND ROAD Address: 3120 OAKWOOD BOULEVARD

City-St-Zip: SUNRISE, FL 33351 City-St-Zip: HOLLYWOOD, FL 33020

Title: Title: () Change (X) Addition () Delete

GOLDSMITH, JEFF Name: Name:

Address: Address: 201 N. US HIGHWAY 1, SUITE C6

City-St-Zip: City-St-Zip: JUPITER, FL 33477

Title: () Delete Title: MGRM () Change (X) Addition

Name: AYERS, STEVE Name:

201 N. US HIGHWAY 1, SUITE C6 Address: Address:

City-St-Zip: City-St-Zip: JUPITER, FL 33477

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: JON FINKEN **MGRM** 10/02/2007