2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L02000023346

Entity Name: FIRST COAST HOSPITALISTS, P.L.

FILED Jan 19, 2005 Secretary of State

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

3763 CATHEDRAL OAKS PLACE, SOUTH 9904 VINEYARD LAKE LN JACKSONVILLE, FL 32217 JACKSONVILLE, FL 32256

Current Mailing Address: New Mailing Address:

3763 CATHEDRAL OAKS PLACE, SOUTH
JACKSONVILLE, FL 32217

9904 VINEYARD LAKE LN
JACKSONVILLE, FL 32256

FEI Number: 54-2071431 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: Name and Address of New Registered Agent:

INTREPID REGISTERED AGENT SERVICES, LLC 4741 ATLANTIC BLVD., SUITE D JACKSONVILLE, FL 32207 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: JOE CAMERLENGO

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

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

Name:SALAMEH, JAMAL SName:SALAMEH, JAMAL SAddress:3763 CATHEDRAL OAKS PL SAddress:9904 VINEYARD LAKE LNCity-St-Zip:JACKSONVILLE, FL 32217City-St-Zip:JACKSONVILLE, FL 32256

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: JAMAL SALAMEH MGR 01/19/2005