

2011 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L02000024258

FILED
Oct 25, 2011
Secretary of State

Entity Name: TREASURE COAST INJURY AND WELLNESS CENTRE, P.L.

Current Principal Place of Business:

600 N US HWY 1
FT. PIERCE, FL 34950

New Principal Place of Business:

1411 3RD CT.
VERO BEACH, FL 32960

Current Mailing Address:

600 N US HWY 1
FT. PIERCE, FL 34950

New Mailing Address:

1411 3RD CT.
VERO BEACH, FL 32960

FEI Number: 90-0047572

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRIFFIN, SHANNON A DR.
600 N US HWY 1
FT. PIERCE, FL 34950 US

Name and Address of New Registered Agent:

GRIFFIN, SHANNON A DR.
1411 3RD. CT.
VERO BEACH, FL 32960 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: SHANNON A GRIFFIN

10/25/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: GRIFFIN, SHANNON A DR
Address: 1411 3RD. CT.
City-St-Zip: VERO BEACH, FL 32960

I hereby 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: DR. SHANNON A GRIFFIN

MGM

10/25/2011

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