

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L02000031614

FILED
Sep 25, 2007
Secretary of State

Entity Name: ACADEMY MEDICAL, L.L.C.

Current Principal Place of Business:

9131 S.W. 49TH PLACE
GAINESVILLE, FL 32608

New Principal Place of Business:

3519 SW 86TH ST
GAINESVILLE, FL 32608

Current Mailing Address:

9131 S.W. 49TH PLACE
GAINESVILLE, FL 32608

New Mailing Address:

3519 SW 86TH ST.
GAINESVILLE, FL 32608

FEI Number: 04-3724072 **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:

PAPA, PATRICK J
9131 S.W. 49TH PLACE
GAINESVILLE, FL 32608 US

Name and Address of New Registered Agent:

PAPA, PATRICK J
3519 SW 86TH ST.
GAINESVILLE, FL 32608 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: PATRICK PAPA

09/25/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PAPA, PATRICK J
Address: 9131 S.W. 49TH PLACE
City-St-Zip: GAINESVILLE, FL 32608

Title: MGRM () Delete
Name: SHAW, DAN
Address: 633 2ND STREET
City-St-Zip: NEPTUNE BEACH, FL 32266

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PAPA, PATRICK J
Address: 3519 SW 86TH ST.
City-St-Zip: GAINESVILLE, FL 32608

Title: MGRM (X) Change () Addition
Name: SHAW, DANIEL M
Address: 222 JOEY DR.
City-St-Zip: ST. AUGUSTINE, FL 32080

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: DANIEL M. SHAW

MR.

09/25/2007

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