

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000011276

Entity Name: CARING PEOPLE, LLC

FILED  
Oct 16, 2009  
Secretary of State

**Current Principal Place of Business:**

15127 JOG ROAD  
SUITE 201  
DELRAY BEACH, FL 33446 US

**New Principal Place of Business:**

**New Mailing Address:**

1169 MAIN AVE.  
CLIFTON, NJ 07011 US

**Current Mailing Address:**

2125 CENTER AVE  
SUITE 308  
FORT LEE, NJ 07028 US

FEI Number: 43-1991934      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

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

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: CORPORATION SERVICE COMPANY

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: EAST, SHALOM  
Address: 2125 CENTER AVE.  
City-St-Zip: FORT LEE, NJ 07028 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: EAST, SHALOM  
Address: 1169 MAIN AVE  
City-St-Zip: CLIFTON, NJ 07011 US

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: SHALOM EAST

MR

10/16/2009

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