

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L03000026185

**FILED**  
**Nov 29, 2012**  
**Secretary of State**

**Entity Name:** ACCESS HEALTH SOLUTIONS, LLC

**Current Principal Place of Business:**

400 SAWGRASS CORPORATE PKWY., #100  
SUNRISE, FL 33325

**New Principal Place of Business:**

**Current Mailing Address:**

400 SAWGRASS CORPORATE PKWY., #100  
SUNRISE, FL 33325

**New Mailing Address:**

**FEI Number:** 56-2384404

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORP DIRECT AGENTS, INC  
515 EAST PARK AVENUE  
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:** MICHELLE DONATO

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** ADAMS, NELSON L III  
**Address:** 400 SAWGRASS CORPORATE PKWY., #100  
**City-St-Zip:** SUNRISE, FL 33325

**Title:** MGRM  
**Name:** BROOKINS, JAMES O  
**Address:** 400 SAWGRASS CORPORATE PKWY., #100  
**City-St-Zip:** SUNRISE, FL 33325

**Title:** MGRM  
**Name:** MOISE, RUDOLPH  
**Address:** 400 SAWGRASS CORPORATE PKWY., #100  
**City-St-Zip:** SUNRISE, FL 33325

**Title:** MRGM  
**Name:** LANDSBAUM, NATHAN  
**Address:** 400 SAWGRASS CORPORATE PKWY., #100  
**City-St-Zip:** SUNRISE, FL 33325

**Title:** MGRM  
**Name:** HUNTER, JESSE  
**Address:** 400 SAWGRASS CORPORATE PKWY., #100  
**City-St-Zip:** SUNRISE, FL 33325

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:** TRICIA DINKELMAN

AUTH

11/29/2012

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