2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Sep 30, 2009
Secretary of State

DOCUMENT# L03000046752

Entity Name: UNITED HEALTH AND REHABILITATION CENTER LLC

Current Principal Place of Business:

3085 NE 163RD STREET
NORTH MIAMI BEACH, FL 33160 US

New Principal Place of Business:

Current Mailing Address:

3085 NE 163RD STREET
NORTH MIAMI BEACH, FL 33160 US

New Mailing Address:

FEI Number: 54-2134924 **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:

NESTOR, MARC DC
3085 NE 163RD STREET
NORTH MIAMI BEACH, FL 33160 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: MARC A. NESTOR

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title:	MGRM	( ) Delete
Name:	NESTOR, LILIAN	
Address:	3085 NE 163RD STREET	
City-St-Zip:	NORTH MIAMI BEACH, FL 33160	
Title:	MGRM	( ) Delete
Name:	NESTOR, MARC A DC	
Address:	3085 NE 163RD STREET	
City-St-Zip:	NORTH MIAMI BEACH, FL 33160	
Title:	MGRM	( ) Delete
Name:	NESTOR, JAMES DC	
Address:	3085 NE 163RD STREET	
City-St-Zip:	NORTH MIAMI BEACH, FL 33160	
Title:	MGRM	( ) Delete
Name:	NESTOR, MARIE	
Address:	3085 NE 163RD STREET	
City-St-Zip:	NORTH MIAMI BEACH, FL 33160	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: MARC A. NESTOR MGRM 09/30/2009

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