

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000055298

Entity Name: C&K MEDICAL LLC

FILED
Oct 31, 2009
Secretary of State

Current Principal Place of Business:

4030 WEST BRAKER LANE
SUITE 401
AUSTIN, TX 78759

New Principal Place of Business:

4815 WEST BRAKER LANE
SUITE 502 PMB 324
AUSTIN, TX 78759

Current Mailing Address:

4030 WEST BRAKER LANE
SUITE 401
AUSTIN, TX 78759

New Mailing Address:

4815 WEST BRAKER LANE
SUITE 502 PMB 324
AUSTIN, TX 78759

FEI Number: 20-0506113 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:

CURTIS, VIRGINIA T
4955 COURTLAND LOOP
WINTER SPRINGS, FL 32708 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: VIRGINIA CURTIS

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CLARK, CHATRICK L
Address: 4030 WEST BRAKER LANE SUITE 401
City-St-Zip: AUSTIN, TX 78759

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CLARK, CHATRICK L
Address: 4815 WEST BRAKER LANE SUITE 502 PMB 324
City-St-Zip: AUSTIN, TX 78759

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: CHATRICK CLARK

MGRM

10/31/2009

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