

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000056766

FILED
Apr 21, 2006
Secretary of State

Entity Name: ANGELS MEDICAL STAFFING LLC

Current Principal Place of Business:

1103 W HIBISCUS BLVD
SUITE 308-X
WEST MELBOURNE, FL 32904

New Principal Place of Business:

3206 SOUTH HOPKINS AVE
SUITE 209
TITUSVILLE, FL 32780

Current Mailing Address:

1103 W HIBISCUS BLVD
SUITE 308-X
WEST MELBOURNE, FL 32904

New Mailing Address:

3206 SOUTH HOPKINS AVE
SUITE 209
TITUSVILLE, FL 32780

FEI Number: 76-0748863 **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:

GREEN, DAVID M
305 W GRANT ST.
APT C-9
PLANT CITY, FL 33563 US

Name and Address of New Registered Agent:

GREEN, DAVID M
3206 SOUTH HOPKINS AVE
SUITE 209
TITUSVILLE, FL 32780 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: DAVID M GREEN

04/21/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGMR () Change (X) Addition
Name: GREEN, DAVID M
Address: 3206 SOUTH HOPKINS AVE #209
City-St-Zip: TITUSVILLE, FL 32780

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID M GREEN

MGMR

04/21/2006

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