

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000004687

**Entity Name:** PARTNERSINSCRIBE, LLC

**FILED**  
**Jan 17, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

6802 ENERGY COURT  
SARASOTA, FL 34240 US

**New Principal Place of Business:**

**Current Mailing Address:**

6802 ENERGY COURT  
SARASOTA, FL 34240 US

**New Mailing Address:**

**FEI Number:** 20-0850160

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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:** MAUREEN CATHELL

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** ORIGIN HEALTHCARE SOLUTIONS LLC  
**Address:** 835 BLOOMFIELD AVENUE  
**City-St-Zip:** WINDSOR, CT 06095

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:** GRANT A. PATRICK

MGR

01/17/2011

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