

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000025680

Entity Name: VEDA R. VYAS, M.D., LLC

FILED
Oct 05, 2005
Secretary of State

Current Principal Place of Business:

1850 LEE RD #347
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

1850 LEE RD #347
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 20-0965468

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VYAS, VEDA R M.D.
1850 LEE RD #347
WINTER PARK, FL 32789 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: VEDA R.VYAS,M.D.,

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

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

ADDITIONS/CHANGES:

Title: M.D. () Change (X) Addition
Name: VYAS, VEDA R OWNER
Address: 1850 LEE ROAD SUITE 347
City-St-Zip: WINTER PARK, FL 32789

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: VEDA R.VYAS,M.D.

M.D.

10/05/2005

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