

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000034888

Entity Name: EC ROST ONCOLOGY LLC

FILED  
Oct 14, 2009  
Secretary of State

## Current Principal Place of Business:

3491-11 THOMASVILLE RD  
401  
TALLAHASSEE, FL 32309

## New Principal Place of Business:

552 MOSS VIEW WAY  
TALLAHASSEE, FL 32312

## Current Mailing Address:

255 TIMBERCREEK CT.  
RENO, NV 89501

## New Mailing Address:

FEI Number: 20-2402278      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:

ROST, ERIC C MD  
6867 HEARTLAND CIRCLE  
TALLAHASSEE, FL 32312      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: ERIC C ROST

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: ROST, ERIC C M.D.  
Address: 3491-11 THOMASVILLE RD  
City-St-Zip: TALLAHASSEE, FL 32309

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

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: ROST, ERIC C M.D.  
Address: 6867 HEARTLAND CIRCLE  
City-St-Zip: TALLAHASSEE, FL 32312

Title: SEC ( ) Change (X) Addition  
Name: BRUNGARD, PAM  
Address: 552 MOSS VIEW WAY  
City-St-Zip: TALLAHASSEE, FL 32312

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: ERIC C ROST

PRES

10/14/2009

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