2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000072667

Entity Name: THE INSTITUTE FOR FOOT & ANKLE SURGERY, P.L.L.C.

FILED Oct 15, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2720 REBECCA LANE 917 RINEHART ROAD

SUITE 102 SUITE 2061

ORANGE CITY, FL 32763 LAKE MARY, FL 32746

Current Mailing Address: New Mailing Address:

2720 REBECCA LANE 917 RINEHART ROAD

SUITE 102 SUITE 2061

ORANGE CITY, FL 32763 LAKE MARY, FL 32746

FEI Number: 20-1717875 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: Name and Address of New Registered Agent:

RIVERA, JOSE A DPM RIVERA, JOSE A DPM 1390 SHADY KNOLL COURT 917 RINEHART RD

LONGWOOD, FL 32750 US SUITE 2061 LAKE MARY. FL 32746 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: JOSE A. RIVERA 10/15/2008

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES:

MANAGING MEMBERS/MANAGERS:

Fitle: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 RIVERA, JOSE A DPM
 Name:
 RIVERA, JOSE A DPM

 Address:
 1390 SHADY KNOLL COURT
 Address:
 917 RINEHART RD #2061

 City-St-Zip:
 LONGWOOD, FL 32750
 City-St-Zip:
 LAKE MARY, FL 32746

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: NAVARRO, MARIELLE Name: NAVARRO, MARIELLE

Name: NAVARRO, MARIELLE
Address: 1390 SHADY KNOLL COURT Address: 917 RINEHART RD #2061
City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: LAKE MARY, FL 32746

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: JOSE A. RIVERA MGR 10/15/2008