

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000077034

Entity Name: LASER PAIN CENTER L.L.C.

FILED
Oct 17, 2009
Secretary of State

Current Principal Place of Business:

7491 NORTH FEDERAL HIGHWAY
SUITE C16
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

4300 N OCEAN BLVD
3
DELRAY BEACH, FL 33483 US

New Mailing Address:

7491 NORTH FEDERAL HIGHWAY
SUITE C16
BOCA RATON, FL 33487

FEI Number: 11-3729294 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:

ADAMS, JOELL C
4300 N OCEAN BLVD
3
DELRAY BEACH, FL 33483 US

Name and Address of New Registered Agent:

FRIEDMAN, DEREK
7491 NORTH FEDERAL HWY
SUITE C16
BOCA RATON, FL 33487 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: DR. DEREK FRIEDMAN

10/17/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: FRIEDMAN, DEREK M
Address: 2557 NORTH CORAL TRACE CIRCLE
City-St-Zip: DELRAY BEACH, FL 33445

Title: MGR () Delete
Name: ADAMS, JOELL C
Address: 4300 N OCEAN BLVD #3
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DR. DEREK FRIEDMAN

MGR

10/17/2009

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