

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000090764

**FILED**  
**Oct 01, 2012**  
**Secretary of State**

**Entity Name:** CONTINIUM HEATHCARE MANAGEMENT, LLC

**Current Principal Place of Business:**

1055 NE 125TH STREET  
NORTH MIAMI, FL 33161

**New Principal Place of Business:**

10800 BISCAYNE BLVD  
810  
NORTH MIAMI, FL 33161

**Current Mailing Address:**

1055 NE 125TH STREET  
NORTH MIAMI, FL 33161

**New Mailing Address:**

10800 BISCAYNE BLVD  
810  
NORTH MIAMI, FL 33161

**FEI Number:** 52-2446754

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THE BERNSTEIN LAW FIRM  
1688 MERIDIAN AVENUE  
418  
MIAMI BEACH, FL 33139 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: MIB

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: KLEIN, AVI  
Address: 10800 BISCAYNE BLVD 810  
City-St-Zip: NORTH MAIMI, FL 33161

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: MIB

RA

10/01/2012

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