

# **2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000000907

**FILED**  
**Nov 28, 2007**  
**Secretary of State**

**Entity Name:** MIAMI ENDOCENTER LLC

**Current Principal Place of Business:**

13133 PROFESSIONAL DRIVE  
200  
JACKSONVILLE, FL 32225

**New Principal Place of Business:**

7500 SW 87TH AVENUE  
SUITE 101  
MIAMI, FL 33173 US

**Current Mailing Address:**

13133 PROFESSIONAL DRIVE  
200  
JACKSONVILLE, FL 32225

**New Mailing Address:**

7500 SW 87TH AVENUE  
SUITE 101  
MIAMI, FL 33173 US

**FEI Number:** 20-2094155      **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:**

VOSE, GRETCHEN  
327 WEKIVA COMMONS CIRCLE  
APOPKA, FL 32712 US

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

LEAVITT, JAMES MD  
7500 SW 87TH AVENUE  
SUITE 101  
MIAMI, FL 33173 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: JAMES LEAVITT, MD

11/28/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: CHVALA, WILLIAM J  
Address: 13133 PROFESSIONAL DRIVE  
City-St-Zip: JACKSONVILLE, FL 32225

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MIAMI ENDOCENTER COR, P.  
Address: 7500 SW 87TH AVENUE, SUITE 101  
City-St-Zip: MIAMI, FL 33173 US

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: JAMES LEAVITT, PRES OF MIAMI ENDOCENTER CO

MGRM

11/28/2007

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