2011 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 06, 2011
Secretary of State

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Entity Name: KIDNEY INSTITUTE OF NAPLES, LLC

Current Principal Place of Business:

878 109TH AVE., N.
NAPLES, FL 34108

New Principal Place of Business:

Current Mailing Address:

878 109TH AVE., N.
NAPLES, FL 34108

New Mailing Address:

FEI Number: 20-2573569 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARK S RUSSO, MD, PHD
878 109TH AVENUE NORTH
NAPLES, FL 34108 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: MARK S. RUSSO, MD. PHD

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: MARK S RUSSO, MD, PHD
Address: 878 109TH AVE., N.
City-St-Zip: NAPLES, FL 34108

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 Statues.

SIGNATURE: MARK S.RUSSO, MD, PHD MBR 10/06/2011

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