

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000040142

FILED
Oct 10, 2007
Secretary of State

Entity Name: TOTAL HEALTH CENTER OF FLORIDA LLC

Current Principal Place of Business:

5425 SOUTH SEMORAN BOULEVARD, SUITE 6
ORLANDO, FL 32822

New Principal Place of Business:

Current Mailing Address:

5425 SOUTH SEMORAN BOULEVARD, SUITE 6
ORLANDO, FL 32822

New Mailing Address:

FEI Number: 20-2722564

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIERRA, KELLYS
5892 PEREGRINE AVE.
ORLANDO, FL 32819 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: KELLYS SIERRA

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SIERRA, KELLYS
Address: 5425 SOUTH SEMORAN BOULEVARD, SUITE 6
City-St-Zip: ORLANDO, FL 32822

ADDITIONS/CHANGES:

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: KELLYS SIERRA

MGRM

10/10/2007

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