

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000059877

FILED
Oct 29, 2008
Secretary of State

Entity Name: TRINITY MEDICAL MANAGEMENT LLC

Current Principal Place of Business:

6861 COBIA CIRCLE
BOYNTON BEACH, FL 33437

New Principal Place of Business:

Current Mailing Address:

6861 COBIA CIRCLE
BOYNTON BEACH, FL 33437

New Mailing Address:

FEI Number: 20-3267241 **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:

Name and Address of New Registered Agent:

DELEON, CESAR
6861 COBIA CIRCLE
BOYNTON BEACH, FL 33437 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: CESAR DELEON

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: DELEON, CESAR
Address: 6861 COBIA CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437

Title: MGR () Delete
Name: DELEON, MARTA
Address: 6861 COBIA CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437

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: CESAR DELEON

MGR

10/29/2008

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