2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000066670

Entity Name: RAMON LEON MD, LLC

FILED Oct 25, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1450 6TH STREET SE 7540 S.W. 61ST AVE. WINTER HAVEN, FL 33880 MIAMI, FL 33143

Current Mailing Address: New Mailing Address:

429 E. SEEGERS RD., APT 107 10035 S.W. 8TH TERRACE

ARLINGTON HEIGHT, IL 60005 MIAMI, FL 33174

FEI Number: 02-0743147 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:

 LEON, RAMON
 LEON, RAMON

 1450 6TH STREET SE
 7540 S.W. 61ST AVE.

 WINTER HAVEN, FL 33880 US
 MIAMI, FL 33143 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: RAMON LEON 10/25/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 LEON, RAMON
 Name:
 LEON, RAMON

 Address:
 429 E. SEEGERS RD. APT. 107
 Address:
 10035 S.W. 8TH TERRACE

City-St-Zip: ARLINGTON HEIGHTS, IL 60005 City-St-Zip: MIAMI, FL 33174

I hereby certify that the information supplied with this filing does not qualify for the 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: RAMON LEON MD, LLC MGRM 10/25/2006