2007 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 10, 2007
Secretary of State

DOCUMENT# L05000073307

Entity Name: A QUALITY CARE TRANSPORTATION LLC

Current Principal Place of Business:

4536 NORTH LANE
ORLANDO, FL 32808

New Principal Place of Business:

2702 BOOKER ST
FT. PIERCE, FL 34947

Current Mailing Address:

4536 NORTH LANE
ORLANDO, FL 32808

New Mailing Address:

P O BOX 585846
ORLANDO, FL 32858

FEI Number: 32-0157758 **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:

WILLIAMS, RAY E JR
4536 NORTH LANE
ORLANDO, FL 32808 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: RAY E WILLIAMS JR

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: WILLIAMS, RAY E JR
Address: 4536 NORTH LANE
City-St-Zip: ORLANDO, FL 32808

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: WILLIAMS, RAY E JR
Address: 102 CAMELOT DR
City-St-Zip: FT. PIERCE, FL 34946

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: RAY E. WILLIAMS JR MR 10/10/2007

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