

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

**FILED
Sep 18, 2006
Secretary of State**

DOCUMENT# L05000115484

Entity Name: COUNTY LINE ROAD PHYSICIANS, LLC

Current Principal Place of Business:

New Principal Place of Business:

201 NOLAND DRIVE
BRANDON, FL 33511 US

Current Mailing Address:

New Mailing Address:

201 NOLAND DRIVE
BRANDON, FL 33511 US

FEI Number: 20-3870531 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:

LASMAN LAW FIRM, P.A.
6152 DELANCEY STATION STREET
SUITE 205
RIVERVIEW, FL 33569 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: JEFFREY M LASMAN

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: SIDHOM, GEORGE S M.D.
Address: 201 NOLAND DRIVE
City-St-Zip: BRANDON, FL 33511 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Delete
Name: MEHTA, MUKESH
Address: 201 NOLAND DRIVE
City-St-Zip: BRANDON, FL 33511 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JEFFREY M LASMAN

RA

09/18/2006

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