

2011 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000122261

FILED
Sep 26, 2011
Secretary of State

Entity Name: SUHAS NEERUKONDA, M.D., LLC

Current Principal Place of Business:

432 MARSH POINT CIRCLE
ST AUGUSTINE, FL 32080

New Principal Place of Business:

Current Mailing Address:

P O BOX 840093
ST AUGUSTINE, FL 32080

New Mailing Address:

FEI Number: 14-1944646

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAYLOR, WAINIO & NEVILLE, PA
320 HIGH TIDE DRIVE, SUITE 201
ST AUGUSTINE, FL 32080 US

Name and Address of New Registered Agent:

NEERUKONDA, SUHAS
432 MARSH POINT CIRCLE
ST AUGUSTINE, FL 32080 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: SUHAS NEERUKONDA

09/26/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: NEERUKONDA, SUHAS P
Address: 432 MARSH POINT CIRCLE
City-St-Zip: ST AUGUSTINE, FL 32080

I hereby 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: SUHAS NEERUKONDA

MGRM

09/26/2011

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