

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000005287

Entity Name: TRINITY PHYSICIANS LLC

FILED
Mar 09, 2009
Secretary of State

Current Principal Place of Business:

5818 SR 54
NEW PORT RICHEY, FL 34652 US

New Principal Place of Business:

Current Mailing Address:

5818 SR 54
NEW PORT RICHEY, FL 34652 US

New Mailing Address:

FEI Number: 20-4136834 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:

KUTTY, MOHAN
7426 COMMUNITY COURT
HUDSON, FL 34667 US

Name and Address of New Registered Agent:

KUTTY, MOHAN
7424 COMMUNITY COURT
HUDSON, FL 34667 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: MOHAN KUTTY

03/09/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MOHANDAS CHILDREN'S, TRUST
Address: 7426 COMMUNITY COURT
City-St-Zip: HUDSON, FL 34667 US

Title: MGR () Delete
Name: KUTTY, MOHAN
Address: 7426 COMMUNITY COURT
City-St-Zip: HUDSON, FL 34667 US

Title: MGR () Delete
Name: MOHAN, MALA
Address: 7426 COMMUNITY COURT
City-St-Zip: HUDSON, FL 34667 US

Title: MGR () Delete
Name: MOHAN, MAYA
Address: 7426 COMMUNITY COURT
City-St-Zip: HUDSON, FL 34667

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MOHANDAS CHILDREN'S, TRUST
Address: 7424 COMMUNITY COURT
City-St-Zip: HUDSON, FL 34667 US

Title: MGR (X) Change () Addition
Name: KUTTY, MOHAN
Address: 7424 COMMUNITY COURT
City-St-Zip: HUDSON, FL 34667 US

Title: MGR (X) Change () Addition
Name: MOHAN, MALA
Address: 7424 COMMUNITY COURT
City-St-Zip: HUDSON, FL 34667 US

Title: MGR (X) Change () Addition
Name: MOHAN, MAYA
Address: 7424 COMMUNITY COURT
City-St-Zip: HUDSON, FL 34667

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: MOHAN KUTTY

MGR

03/09/2009

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