

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000044897

FILED
Oct 10, 2007
Secretary of State

Entity Name: ARRRHYTHMIA SYNCOPE CONSULTANTS, L.L.C.

Current Principal Place of Business:

MERCY HOSPITAL, BAYSIDE PAVILION, 2ND FLOOR
3641 S. MIAMI AVE.
MIAMI, FL 33130

New Principal Place of Business:

MERCY HOSPITAL, BAYSIDE PAVILION, 2ND FLOOR
3641 S. MIAMI AVE.
MIAMI, FL 33133

Current Mailing Address:

MERCY HOSPITAL, BAYSIDE PAVILION, 2ND FLOOR
3641 S. MIAMI AVE.
MIAMI, FL 33130

New Mailing Address:

MERCY HOSPITAL, BAYSIDE PAVILION, 2ND FLOOR
3641 S. MIAMI AVE.
MIAMI, FL 33133

FEI Number: 20-4821289

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INTERIAN, ALBERTO M.D.
MERCY HOSPITAL, BAYSIDE PAVILION, 2ND FLOOR
3641 S. MIAMI AVE.
MIAMI, FL 33130 US

Name and Address of New Registered Agent:

INTERIAN, ALBERTO M.D.
MERCY HOSPITAL, BAYSIDE PAVILION, 2ND FLOOR
3641 S. MIAMI AVE.
MIAMI, FL 33133 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: ALBERTO INTERIAN MD

10/10/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: INTERIAN, ALBERTO M.D.
Address: MERCY HOSPITAL, BAYSIDE PAVILION, 2ND FLOOR
City-St-Zip: MIAMI, FL 33130

Title: MGRM () Delete
Name: PEKKA, PETER
Address: MERCY HOSPITAL, BAYSIDE PAVILION, 2ND FLOOR
City-St-Zip: MIAMI, FL 33130

Title: MGRM (X) Delete
Name: GARCIA, VICENTE P.A.
Address: MERCY HOSPITAL, BAYSIDE PAVILION, 2ND FLOOR
City-St-Zip: MIAMI, FL 33130

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: INTERIAN, ALBERTO M.D.
Address: MERCY HOSPITAL, BAYSIDE PAVILION, 2ND FLOOR
City-St-Zip: MIAMI, FL 33133

Title: MGRM (X) Change () Addition
Name: GARCIA, PETER V MD
Address: MERCY HOSPITAL, BAYSIDE PAVILION, 2ND FLOOR
City-St-Zip: MIAMI, FL 33133

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

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: ALBERTO INTERIAN MD

MGRM

10/10/2007

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