2008 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Nov 05, 2008
Secretary of State

DOCUMENT# L07000009272

Entity Name: ZAW FAMILY MEDICAL CENTER, LLC

Current Principal Place of Business:

7411 HUNTERS GREENE CIRCLE
LAKELAND, FL 33810 US

New Principal Place of Business:

Current Mailing Address:

7411 HUNTERS GREENE CIRCLE
LAKELAND, FL 33810 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LASMAN, JEFFREY M ESQ
6152 DELANCEY STATION STREET
SUITE 205
RIVERVIEW, FL 33569 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: LASMAN, JEFFREY

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: MIN, ZAW M.D.
Address: 7411 HUNTERS GREENE CIRCLE
City-St-Zip: LAKELAND, FL 33810 US

ADDITIONS/CHANGES:

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: ZAW MIN MD 11/05/2008

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