

2012 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000036694

Entity Name: PRACTICE MEDX, LLC

FILED
Oct 05, 2012
Secretary of State

Current Principal Place of Business:

2600 NORTH MILITARY TRAIL
SUITE 410
BOCA RATON, FL 33431

New Principal Place of Business:

10480 SW 56TH ST
COOPER CITY, FL 33328

Current Mailing Address:

2600 NORTH MILITARY TRAIL
SUITE 410
BOCA RATON, FL 33431

New Mailing Address:

PO BOX 812111
BOCA RATON, FL 334812111 US

FEI Number: 42-1726593

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONSIGNORE, JASON
2600 NORTH MILITARY TRAIL
SUITE 410
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

MONSIGNORE, JASON
10480 SW 56TH ST
COOPER CITY, FL 33328 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: JASON MONSIGNORE

10/05/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: JASON MONSIGNORE ENTERPRISES INC.
Address: 10480 SW 56TH ST
City-St-Zip: COOPER CITY, FL 33328

Title: MGRM
Name: BRAD MITCHELL ENTERPRISES INC.
Address: 10480 SW 56TH ST
City-St-Zip: COOPER CITY, FL 33328

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: JASON MONSIGNORE

COO

10/05/2012

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