2011 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Apr 28, 2011
Secretary of State

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Entity Name: HEALTHCARE REAL ESTATE SERVICES LLC

Current Principal Place of Business:

306 ALCAZAR AVENUE
SUITE 201
CORAL GABLES, FL 33134 US

New Principal Place of Business:

770 PONCE DE LEON BLVD
PH
CORAL GABLES, FL 33134 US

Current Mailing Address:

306 ALCAZAR AVENUE
SUITE 201
CORAL GABLES, FL 33134 US

New Mailing Address:

770 PONCE DE LEON BLVD
PH
CORAL GABLES, FL 33134 US

FEI Number: 26-0442163 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SARDINAS, BENJAMIN A
306 ALCAZAR AVENUE
SUITE 210
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

SARDINAS, BENJAMIN A
770 PONCE DE LEON BLVD
PH
CORAL GABLES, FL 33134 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: BENJAMIN A SARDINAS 04/28/2011
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: SARDINAS, BENJAMIN A
Address: 770 PONCE DE LEON BLVD PH
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGRM
Name: GARCIA, ENRIQUE
Address: 770 PONCE DE LEON BLVD PH
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGR
Name: SOLBERG, MARCOS
Address: 770 PONCE DE LEON BLVD PH
City-St-Zip: CORAL GABLES, FL 33134 US

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 Statues.

SIGNATURE: BENJAMIN A SARDINAS MGRM 04/28/2011
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date