

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000057877

FILED
Dec 04, 2008
Secretary of State

Entity Name: DBD LEGAL NURSE CONSULTANTS, LLC

Current Principal Place of Business:

6500 MAIN STREET SUITE 10-304
MIAMI LAKES, FL 33014

New Principal Place of Business:

6501 MAIN STREET
9-307
MIAMI LAKES, FL 33014

Current Mailing Address:

6500 MAIN STREET SUITE 10-304
MIAMI LAKES, FL 33014

New Mailing Address:

6501 MAIN STREET
9-307
MIAMI LAKES, FL 33014

FEI Number: 26-0302013

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DAVILA, DESIREE B
6500 MAIN STREET SUITE 10-304
MIAMI LAKES, FL 33014 US

Name and Address of New Registered Agent:

DAVILA, DESIREE B
6501 MAIN STREET SUITE
9-307
MIAMI LAKES, FL 33014 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: DESIREE B. DAVILA

12/04/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DAVILA, DESIREE B
Address: 6500 MAIN STREET SUITE 10-304
City-St-Zip: MIAMI LAKES, FL 33014

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: DAVILA, DESIREE B
Address: 6501 MAIN STREET SUITE 9-307
City-St-Zip: MIAMI LAKES, FL 33014

Title: VP () Change (X) Addition
Name: ESCAPA, ANTHONY
Address: 6501 MAIN STREET 9-307
City-St-Zip: MAIN LAKES, FL 33014

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: DESIREE DAVILA

PRES

12/04/2008

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