2011 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Apr 27, 2011
Secretary of State

DOCUMENT# L07000061782

Entity Name: GLADES HOME HEALTH CARE MEDICAL CENTER, LLC

Current Principal Place of Business:

173 W. AVE. A
BELLE GLADE, FL 33430

New Principal Place of Business:

Current Mailing Address:

173 W. AVE. A
BELLE GLADE, FL 33430

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:

ROBERTS, DONIA A
1100 NORTH MAIN STREET SUITE C
BELLE GLADE, FL 33430 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: DONIA A ROBERTS

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: HASAN, YOLANDA
Address: 173 W. AVE. A
City-St-Zip: BELLE GLADE, FL 33430

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: YOLANDA HASAN MGRM 04/27/2011

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