2013 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Apr 08, 2013
Secretary of State

DOCUMENT# L07000065798

Entity Name: PAIN MANAGEMENT SOLUTIONS, LLC

Current Principal Place of Business:

4136 STAFFORDSHIRE DR.
LAKELAND, FL 33809

New Principal Place of Business:

Current Mailing Address:

4136 STAFFORDSHIRE DR.
LAKELAND, FL 33809

New Mailing Address:

FEI Number: 42-1731914 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ELDEEB, MOHAMMAD A
4136 STAFFORDSHIRE DR.
LAKELAND, FL 33809 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: MOHAMMAD ELDEEB

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: ELDEEB, MOHAMMAD A
Address: 4136 STAFFORDSHIRE DR.
City-St-Zip: LAKELAND, FL 33809

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: MOHAMMAD ELDEEB MD 04/08/2013

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