

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000070101

Entity Name: FAITH MEDICAL INSTITUTE LLC

FILED
Oct 15, 2008
Secretary of State

Current Principal Place of Business:

18301 N.W. 2ND CT.
MIAMI, FL 33169

New Principal Place of Business:

2040 NE 163RD STREET
1ST FLOOR
N. MIAMI BEACH, FL 33162

Current Mailing Address:

P.O. BOX 163809
MIAMI, FL 33116

New Mailing Address:

18301 NW 2ND COURT
MIAMI, FL 33169

FEI Number: 14-2003105 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

DALLAS, BASIL L
18301 N.W. 2ND CT.
MIAMI, FL 33169 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: BASIL DALLAS

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DACOSTA-DALLAS, MARGARET
Address: 18301 NW 2ND CT.
City-St-Zip: MIAMI, FL 33169

Title: MGRM () Delete
Name: DALLAS, L. KAYE
Address: 18301 N.W. 2ND CT.
City-St-Zip: MIAMI, FL 33169

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MARGARET DACOSTA-DALLAS

MGRM

10/15/2008

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