

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000076374

**FILED**  
**Oct 16, 2012**  
**Secretary of State**

**Entity Name:** MBC PROPERTY OF NEW SMYRNA LLC

**Current Principal Place of Business:**

317 S. DIXIE FREEWAY  
NEW SMYRNA BEACH, FL 32168 US

**New Principal Place of Business:**

**Current Mailing Address:**

317 S. DIXIE FREEWAY  
NEW SMYRNA BEACH, FL 32168 US

**New Mailing Address:**

**FEI Number:** 26-0588874

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GARCIA-PILCHICK, CRISTINA M.D.  
104 VIA CAPRI  
NEW SMYRNA BEACH, FL 32169 US

**Name and Address of New Registered Agent:**

GARCIA, CRISTINA M.D.  
317 S. DIXIE FREEWAY  
NEW SMYRNA BEACH, FL 32168 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: CRISTINA GARCIA

10/16/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: GARCIA, CRISTINA M.D.  
Address: 317 S. DIXIE FREEWAY  
City-St-Zip: NEW SMYRNA BEACH, FL 32168 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 Statutes.

SIGNATURE: CRISTINA GARCIA

MGRM

10/16/2012

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