

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000089155

**FILED**  
**Jan 24, 2011**  
**Secretary of State**

**Entity Name:** KIPPSUTTON MEDICAL CONSULTING SERVICES, LLC

**Current Principal Place of Business:**

7389 FEATHERSTONE BLVD.  
SARASOTA, FL 34238

**New Principal Place of Business:**

**Current Mailing Address:**

7389 FEATHERSTONE BLVD.  
SARASOTA, FL 34238

**New Mailing Address:**

**FEI Number:** 36-4619477

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KIPP-SUTTON, KERRI  
7389 FEATHERSTONE BLVD.  
SARASOTA, FL 34238 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: KERRI KIPP-SUTTON

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: KIPP-SUTTON, KERRI  
Address: 7389 FEATHERSTONE BLVD.  
City-St-Zip: SARASOTA, FL 34238

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: KERRI KIPP-SUTTON

MGR

01/24/2011

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