

2013 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000097276

FILED
Dec 12, 2013
Secretary of State

Entity Name: PRO MOTION THERAPY OF LAKE CITY, LLC

Current Principal Place of Business:

404 NW HALL OF FAME DR.
LAKE CITY, FL 32055 US

New Principal Place of Business:

Current Mailing Address:

404 NW HALL OF FAME DR.
LAKE CITY, FL 32055 US

New Mailing Address:

FEI Number: 90-0336865

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SGANGA, BRIAN J ESQ.
404 NW HALL OF FAME DR.
LAKE CITY, FL 32055 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: BRIAN J. SGANGA

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: SGANGA, MELINDA D
Address: 404 NW HALL OF FAME DR.
City-St-Zip: LAKE CITY, FL 32055

Title: MGRM
Name: SGANGA, BRIAN J
Address: 404 NW HALL OF FAME DR.
City-St-Zip: LAKE CITY, FL 32055

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: BRIAN J. SGANGA

MGRM

12/12/2013

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