2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Mar 23, 2009
Secretary of State

DOCUMENT# L07000110813

Entity Name: FLORIDA INJURY LONGWOOD, LLC

Current Principal Place of Business:

8413 KEMPER LN
WINDERMERE, FL 34786

New Principal Place of Business:

412 S RONALD REAGAN BLVD
LONGWOOD, FL 32750

Current Mailing Address:

8413 KEMPER LN
WINDERMERE, FL 34786

New Mailing Address:

412 S RONALD REAGAN BLVD
LONGWOOD, FL 32750

FEI Number: 77-0703605 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

RUSSO, KIMBERLY
8413 KEMPER LN
WINDERMERE, FL 34786 US

Name and Address of New Registered Agent:

RUSSO, KIMBERLY
410 S RONALD REAGAN BLVD
LONGWOOD, FL 32750 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: KIM RUSSO 03/23/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: RUSSO, KIMBERLY
Address: 8413 KEMPER LN
City-St-Zip: WINDERMERE, FL 34786

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: RUSSO, KIMBERLY
Address: 410 RONALD REAGAN BLVD
City-St-Zip: LONGWOOD, FL 32750

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: KIM RUSSO CEO 03/23/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date