2012 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 01, 2012
Secretary of State

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Entity Name: KEYSTONE BEHAVIORAL PEDIATRICS, LLC

Current Principal Place of Business:

6867 SOUTHPOINT DRIVE NORTH
SUITE 106
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

6867 SOUTHPOINT DRIVE NORTH
SUITE 106
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 26-1430763 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FALWELL, KATHERINE
6867 SOUTHPOINT DRIVE NORTH
SUITE 106
JACKSONVILLE, FL 32216 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: KATHERINE D. FALWELL

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: FALWELL, KATHERINE
Address: 129 RETREAT PLACE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: MGR
Name: WALCUTT, JOHN C
Address: 129 RETREAT PLACE
City-St-Zip: JACKSONVILLE, FL 32082

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 Statues.

SIGNATURE: JOHN C. WALCUTT CFO 10/01/2012

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