

# 2013 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000117114

**FILED**  
**Apr 15, 2013**  
**Secretary of State**

**Entity Name:** ADVANCED VASCULAR ACCESS OF BREVARD LLC

**Current Principal Place of Business:**

3682 N. WICKHAM RD, SUITE B1114  
MELBOURNE, FL 32935

**New Principal Place of Business:**

1270 N. WICKHAM RD, SUITE 16-511  
MELBOURNE, FL 32935

**Current Mailing Address:**

3682 N. WICKHAM RD, SUITE B1114  
MELBOURNE, FL 32935

**New Mailing Address:**

1270 N. WICKHAM RD, SUITE 16-511  
MELBOURNE, FL 32935

FEI Number: 26-1449992

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BRUNN, FRANK  
407 EAST NEW HAVEN AVENUE  
MELBOURNE, FL 329014507 US

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

ELLIOTT, DENISE  
1270 N. WICKHAM RD  
MELBOURNE, FL 32934 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: DENISE ELLIOTT

04/15/2013

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: ELLIOTT, DENISE  
Address: 1270 N. WICKHAM RD, SUITE 16-511  
City-St-Zip: MELBOURNE, FL 32935

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: DENISE ELLIOTT

MGR

04/15/2013

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