

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000125431

FILED
Feb 17, 2009
Secretary of State

Entity Name: GREGORY W. NESTOR, M.D., LLC

Current Principal Place of Business:

5000 PARK STREET NORTH
SUITE 1013
ST. PETERSBURG, FL 33709 US

New Principal Place of Business:

Current Mailing Address:

5000 PARK STREET NORTH
SUITE 1013
ST. PETERSBURG, FL 33709 US

New Mailing Address:

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

Name and Address of New Registered Agent:

NESTOR, GREGORY W
5000 PARK STREET NORTH
SUITE 1013
ST PETERSBURG, FL 33709 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: GREGORY W. NESTOR MD

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: NESTOR, GREGORY W
Address: 5000 PARK STREET NORTH
City-St-Zip: ST PETERSBURG, FL 33709

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: NESTOR, GREGORY W MD
Address: 5000 PARK STREET NORTH
City-St-Zip: ST PETERSBURG, FL 33709

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: GREGORY W. NESTOR MD

MGRM

02/17/2009

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