

2013 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000011617

FILED
Nov 04, 2013
Secretary of State

Entity Name: SLEEP PROFESSIONALS OF FLORIDA, LLC

Current Principal Place of Business:

3628 MADACA LANE
TAMPA, FL 33618

New Principal Place of Business:

Current Mailing Address:

1680 ROUTE 23
SUITE 400
WAYNE, NJ 07470

New Mailing Address:

130 GAITHER DRIVE
SUITE 136
MOUNT LAUREL, NJ 08054

FEI Number: 26-1874585

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: JUDITH ARGAO, ASST. VP/ASST. SECY.

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: PERSANTE HEALTH CARE, INC.
Address: 130 GAITHER DRIVE, SUITE 136
City-St-Zip: MOUNT LAUREL, NJ 08054

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: MICHAEL D. KASWAN, CEO OF MANAGER

MGR

11/04/2013

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