

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000013964

**FILED**  
**Apr 18, 2010**  
**Secretary of State**

**Entity Name:** MINI CLINIC OF VERO BEACH LLC

**Current Principal Place of Business:**

1850 37TH STREET  
SUITE C  
VERO BEACH, FL 32960

**New Principal Place of Business:**

1635 14TH AVENUE  
VERO BEACH, FL 32960

**Current Mailing Address:**

1850 37TH STREET  
SUITE C  
VERO BEACH, FL 32960

**New Mailing Address:**

PO BOX 650309  
VERO BEACH, FL 32965

**FEI Number:** 11-3836346      **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:**

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

SMALLBIZ AGENTS, LLC  
4244 W. TENNESSEE STREET  
#185  
TALLAHASSEE, FL 32304 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: PATRICIA A. GRENZENBACH

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: GRENZENBACH, PATRICIA A  
Address: 7240 4TH STREET  
City-St-Zip: VERO BEACH, FL 32968

Title: MGRM  
Name: GRENZENBACH, JOHN  
Address: 7240 4TH STREET  
City-St-Zip: VERO BEACH, FL 32968

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: PATRICIA A. GRENZENBACH

MGMR

04/18/2010

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