

2011 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000017236

FILED
Feb 01, 2011
Secretary of State

Entity Name: CARE REHAB CENTER, LLC

Current Principal Place of Business:

8396 SW 8TH STREET
SECOND FLOOR
MIAMI, FL 33144

New Principal Place of Business:

3900 NW 79TH AVENUE
219
MIAMI, FL 33166

Current Mailing Address:

8396 SW 8TH STREET
SECOND FLOOR
MIAMI, FL 33144

New Mailing Address:

2725 SW 114TH AVENUE
MIAMI, FL 33165

FEI Number: 77-0713357

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EXPOSITO, AMARO M
8396 SW 8TH STREET
SECOND FLOOR
MIAMI, FL 33144 US

Name and Address of New Registered Agent:

EXPOSITO, AMARO M
2725 SW 114TH AVENUE
MIAMI, FL 33165 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: AMARO EXPOSITO

02/01/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: EXPOSITO, AMARO M
Address: 2725 SW 114TH AVENUE
City-St-Zip: MIAMI, FL 33165

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: AMARO EXPOSITO

PRES

02/01/2011

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