

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000021579

**FILED**  
**Sep 30, 2010**  
**Secretary of State**

**Entity Name:** A NEW BEGINNING ASSISTED LIVING LLC

**Current Principal Place of Business:**

105 N.W. 11TH AVENUE  
BOYNTON BEACH, FL 33435

**New Principal Place of Business:**

105 N.E. 11TH AVENUE  
BOYNTON BEACH, FL 33435

**Current Mailing Address:**

105 N.W. 11TH AVENUE  
BOYNTON BEACH, FL 33435

**New Mailing Address:**

105 N.E. 11TH AVENUE  
BOYNTON BEACH, FL 33435

**FEI Number:** 26-2226133

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GREEN, MICHELE W MGR  
105 NE 11TH AVENUE  
BOYNTON BEACH, FL 33435 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: MICHELE W. GREEN

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: GREEN, MICHELE W  
Address: 105 N.W. 11TH AVENUE  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: S  
Name: GREEN, MICHELE W  
Address: 105 N.W. 11TH AVENUE  
City-St-Zip: BOYNTON BEACH, FL 33435

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: MICHELE W. GREEN

MGR

09/30/2010

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