2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 08, 2009
Secretary of State

DOCUMENT# L08000041317

Entity Name: UNITY CHIROPRACTIC CARE LLC

Current Principal Place of Business:

1308 ROSE BVLD SUITE
A
ORLANDO, FL 32839

New Principal Place of Business:

Current Mailing Address:

1308 ROSE BVLD SUITE
A
ORLANDO, FL 32839

New Mailing Address:

P.O. BOX 111177
NAPLES, FL 34108

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:

DRALUCK, DEAN
1308 ROSE BLVD
A
ORLANDO, FL 32839 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: DEAN E. DRALUCK

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: DRALUCK, DEAN
Address: 1308 ROSE BLVD SUITE A
City-St-Zip: ORLANDO, FL 32839

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: DEAN DRALUCK RA 10/08/2009

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