2011 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 03, 2011
Secretary of State

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Entity Name: JAMES E. HARDY, MD PLASTIC SURGERY, LLC

Current Principal Place of Business:

11512 LAKE MEAD AVENUE, STE. 605
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

11512 LAKE MEAD AVENUE, STE. 605
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 26-2520306 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARDY, JAMES E
11512 LAKE MEAD AVENUE, STE. 605
JACKSONVILLE, FL 32256 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: JAMES E HARDY MD

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: LLC
Name: GONZALEZ, DEBORAH
Address: 11512 LAKE MEAD AVE STE 605
City-St-Zip: JACKSONVILLE, FL 32256

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 Statues.

SIGNATURE: DEBORAH GOZNALEZ LLC 10/03/2011

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