

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000049386

FILED
Oct 16, 2009
Secretary of State

Entity Name: FAMILY CHOICE HEALTH CARE LLC

Current Principal Place of Business:

3554 WEST ORANGE COUNTRY CLUB DRIVE
SUITE 130
WINTER GARDEN, FL 34787

New Principal Place of Business:

431 WEST VINE STREET
KISSIMMEE, FL 34741

Current Mailing Address:

5021 WISEBIRD DRIVE
WINDEREMERE, FL 34786

New Mailing Address:

P.O. BOX 22396
LAKE BUENA VISTA, FL 32830

FEI Number: 26-3973913 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

SIDDIQUI, NASIMUL H
5021 WISEBIRD DRIVE
WINDEREMERE, FL 34786 US

Name and Address of New Registered Agent:

SIDDIQUI, NASIMUL H
9838 BECKY CYPRESS WAY
ORLANDO, FL 32836 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: NASIMUL SIDDIQUI

10/16/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SIDDIQUI, NASIMUL H
Address: 5021 WISEBIRD DRIVE
City-St-Zip: WINDEREMERE, FL 34786

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SIDDIQUI, NASIMUL H
Address: 9838 BECKY CYPRESS WAY
City-St-Zip: ORLANDO, FL 32836

Title: MGRM () Change (X) Addition
Name: ALI, SAMREEN
Address: 9838 BECKY CYPRESS WAY
City-St-Zip: ORLANDO, FL 32836

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: NASIMUL SIDDIQUI

MGRM

10/16/2009

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