

2010 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000060725

FILED
Mar 15, 2010
Secretary of State

Entity Name: WILLIAM T. GRANT D.M.D., LLC

Current Principal Place of Business:

4950 LE JEUNE ROAD, SUITE B
CORAL GABLES, FL 33146

New Principal Place of Business:

Current Mailing Address:

4950 LE JEUNE ROAD, SUITE B
CORAL GABLES, FL 33146

New Mailing Address:

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

Name and Address of New Registered Agent:

ATRIUM REGISTERED AGENTS, INC.
1500 SAN REMO AVE., SUITE 125
CORAL GABLES, FL 33146 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: ROBERT A. STAMEN VP OF ATRIM REGISTERED

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: GRANT, WILLIAM T
Address: 4950 LE JEUNE ROAD, SUITE B
City-St-Zip: CORAL GABLES, FL 33146

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: WILLIAM T. GRANT

MGR

03/15/2010

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