

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000085791

FILED
Oct 04, 2009
Secretary of State

Entity Name: INTELLIGENT HEALTH LLC

Current Principal Place of Business:

247 WEST CHRYSTIE CIRCLE
DELRAY BEACH, FL 33484 US

New Principal Place of Business:

Current Mailing Address:

247 WEST CHRYSTIE CIRCLE
DELRAY BEACH, FL 33484 US

New Mailing Address:

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:

Name and Address of New Registered Agent:

PROSCURSHIM, IGOR
247 WEST CHRYSTIE CIRCLE
DELRAY BEACH, FL 33484 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: IGOR PROSCURSHIM

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PROSCURSHIM, IGOR
Address: 247 WEST CHRYSTIE CIRCLE
City-St-Zip: DELRAY BEACH, FL 33484 US

Title: MGR () Delete
Name: PROSCURSHIM, ALEXANDER
Address: 247 WEST CHRYSTIE CIRCLE
City-St-Zip: DELRAY BEACH, FL 33484

ADDITIONS/CHANGES:

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

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: ALEXANDER PROSCURSHIM

MGR

10/04/2009

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