

**2009 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000109483

FILED  
Oct 08, 2009  
Secretary of State

**Entity Name:** CANCER DATA MANAGEMENT ALTERNATIVES, LLC

**Current Principal Place of Business:**

4045 RODBY DR  
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

**Current Mailing Address:**

4045 RODBY DR  
JACKSONVILLE, FL 32210

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

DEARMON, BARBARA J  
4045 RODBY DR  
JACKSONVILLE, FL 32210    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: BARBARA J DEARMON

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title:            MGR            ( ) Delete  
Name:            DEARMON, BARBARA J  
Address:        4045 RODBY DR  
City-St-Zip:    JACKSONVILLE, FL 32210

**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: BARBARA J DEARMON

MGR

10/08/2009

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