

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000110340

**FILED**  
**Oct 29, 2010**  
**Secretary of State**

**Entity Name:** PREMIUM RX STAFFING, LLC

**Current Principal Place of Business:**

20433 N.W. 15TH AVE.  
MIAMI, FL MIAMI US

**New Principal Place of Business:**

914 NW 206 TERR  
MIAMI, FL 33169 US

**Current Mailing Address:**

20433 N.W. 15TH AVE.  
MIAMI, FL MIAMI US

**New Mailing Address:**

914 NW 206 TERR  
MIAMI, FL 33169 US

**FEI Number:** 26-3805191

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS BLVD.  
A-100  
TAMPA, FL 33612 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:** TANIA LEMUS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** ROBERTS, PAMELA  
**Address:** 914 NW 206 TERR  
**City-St-Zip:** MIAMI, FL 33169 US

**Title:** MGR  
**Name:** DOMINGUEZ, LYZ  
**Address:** 914 NW 206 TERR  
**City-St-Zip:** MIAMI, FL 33169 US

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:** LYZ DOMINGUEZ

MGR

10/29/2010

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