2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000110847

Entity Name: BEST DOCTORS ADMINISTRATION SERVICES LLC

FILED Oct 20, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

ONE BOSTON PLACE, 32ND FL BOSTON, MA 02108

Current Mailing Address: New Mailing Address:

ONE BOSTON PLACE, 32ND FL BOSTON, MA 02108

FEI Number: 27-0842366 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CORPORATION COMPANY OF MIAMI CORPORATION COMPANY OF MIAMI 201 SOUTH BISCAYNE BOULEVARD(LAD) 201 SOUTH BISCAYNE BOULEVARD (LAD) STE 1500 STE 1500 MIAMI, FL 33131 US MIAMI, FL 33131 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: CAVELL J. ANDERSON, ASST. SECRETARY 10/20/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

() Delete Title: () Change (X) Addition FALCHUK, EVAN Name: Name:

Address: Address: ONE BOSTON PLACE, 32ND FL City-St-Zip: City-St-Zip: BOSTON, MA 02108 US

() Change (X) Addition Title: Title: MGR () Delete

Name: Name: SELIGMAN, DAVID Address:

Address: ONE BOSTON PLACE, 32ND FL City-St-Zip: City-St-Zip: BOSTON, MA 02108 US

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: EVAN FALCHUK 10/20/2009