

2013 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L09000004225

FILED
Sep 30, 2013
Secretary of State

Entity Name: LYNDEN NURSING SERVICE L.L.C.

Current Principal Place of Business:

3900 WOODLAKE BLVD
SUITE 307
GREENACRES, FL 33463

New Principal Place of Business:

Current Mailing Address:

8247 GENOVA WAY
LAKE WORTH, FL 33467

New Mailing Address:

FEI Number: 30-0525951

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, LYNDEN A MR.
8247 GENOVA WAY
LAKE WORTH, FL 33467 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: LYNDEN WILLIAMS

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: WILLIAMS, LYNDEN A MR.
Address: 8247 GENOVA WAY
City-St-Zip: LAKE WORTH, FL 33467

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: LYNDEN WILLIAMS

MGRM

09/30/2013

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