

2011 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L09000029848

FILED
Jun 28, 2011
Secretary of State

Entity Name: 441 URGENT CARE CENTER, LLC

Current Principal Place of Business:

17820 SE 109TH AVE
SUITE 108
SUMMERFIELD, FL 34491

New Principal Place of Business:

Current Mailing Address:

17820 SE 109TH AVE
SUITE 108
SUMMERFIELD, FL 34491

New Mailing Address:

FEI Number: 26-4543028

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANTOS, JOAO A
17820 SE 109TH AVE
SUITE 108
SUMMERFIELD, FL 34491 US

Name and Address of New Registered Agent:

BARBARA AND VALERIE'S BOOKKEEPING INC
11547 SE US HIGHWAY 441
SUITE 101
BELLEVIEW, FL 34420 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: VALERIE J LOSITO

06/28/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: SANTOS, JOAO A
Address: 17820 SE 109TH AVE
City-St-Zip: SUMMERFIELD, FL 34491

Title: MGR
Name: SANTOS, ADAMASTOR
Address: 17820 SE 109TH AVE
City-St-Zip: SUMMERFIELD, FL 34491

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: JOAO SANTOS

MGR

06/28/2011

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