

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000044364

**FILED**  
**Nov 05, 2010**  
**Secretary of State**

**Entity Name:** QUANTUM HEALTH GROUP LLC

**Current Principal Place of Business:**

5805 BLUE LAGOON DRIVE  
#280  
MIAMI, FL 33126

**New Principal Place of Business:**

**Current Mailing Address:**

5805 BLUE LAGOON DRIVE  
#280  
MIAMI, FL 33126

**New Mailing Address:**

**FEI Number:** 26-4821792

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GONZALEZ, JOSE I  
5805 BLUE LAGOON DRIVE  
#280  
MIAMI, FL FL 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:** JOSE I GONZALEZ

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** GONZALEZ, JOSE I  
**Address:** 5805 BLUE LAGOON DRIVE #280  
**City-St-Zip:** MIAMI, FL 33126

**Title:** MGR  
**Name:** FERNANDEZ, MANUEL  
**Address:** 5805 BLUE LAGOON DRIVE #280  
**City-St-Zip:** MIAMI, FL 33126

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:** JOSE I GONZALEZ

MGR

11/05/2010

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