2010 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Sep 27, 2010
Secretary of State

DOCUMENT# L09000048347

Entity Name: BEELINE MEDICAL TRAINING, LLC

Current Principal Place of Business:

1521 S.E. 47TH AVENUE
OCALA, FL 34471 US

New Principal Place of Business:

233 NE 58TH AVE
OCALA, FL 34470 US

Current Mailing Address:

P.O. BOX 698
OCALA, FL 34478 US

New Mailing Address:

1530 SE 47TH AVE.
OCALA, FL 34470 US

FEI Number: 27-0203604 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

YANCEY, PATRICIA F
1521 S.E. 47TH AVENUE
OCALA, FL 34471 US

Name and Address of New Registered Agent:

YANCEY, PATRICIA F
1530 S.E. 47TH AVENUE
OCALA, FL 34471 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: PATRICIA F. YANCEY RN ADMINISTRATOR 09/27/2010
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: YANCEY, PATRICIA F
Address: 1530 SE 47TH AVE.
City-St-Zip: OCALA, FL 34470 US

Title: MGRM
Name: YANCEY, ROBERT C
Address: 1530 SE 47TH AVE
City-St-Zip: OCALA, FL 34470 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 Statues.

SIGNATURE: ROBERT CARL YANCEY MR. 09/27/2010
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date