

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000050835

**FILED**  
**Jul 06, 2012**  
**Secretary of State**

**Entity Name:** HOUSE DOCTOR NOW LLC

**Current Principal Place of Business:**

1218 CUPID AVE  
CHRISTMAS, FL, 32709

**New Principal Place of Business:**

1218 CUPID AVE  
CHRISTMAS, FL 32709

**Current Mailing Address:**

P.O. BOX 237  
CHRISTMAS, FL 32709

**New Mailing Address:**

**FEI Number:** 27-0237371

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

RAPISARDA, JASON J OWNER  
1218 CUPID AVE  
CHRISTMAS, FL, FL 32709 US

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

RAPISARDA, JASON J OWNER  
1218 CUPID AVE  
CHRISTMAS, FL 32709 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: JASON RAPISARDA

07/06/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: RAPISARDA, BEATRIZ E MGRM  
Address: 1218 CUPID AVE  
City-St-Zip: CHRISTMAS, FL 32709

Title: MGRM  
Name: RAPISARDA, JASON J MGRM  
Address: 1218 CUPID AVE  
City-St-Zip: CHRISTMAS, FL 32709

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: BEATRIZ RAPISARDA

MGRM

07/06/2012

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