

2011 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L09000056534

FILED
Oct 06, 2011
Secretary of State

Entity Name: SERENITY WAY ASSISTED LIVING "LLC"

Current Principal Place of Business:

597 SW FELDMAN AVE
PORT ST. LUCIE,, FL 34953

New Principal Place of Business:

597 SW FELDMAN AVE
PORT ST. LUCIE,, FL 34953 UN

Current Mailing Address:

P.O. BOX 880272
PORT ST LUCIE, FL 34953

New Mailing Address:

597 SW FELDMAN AVE
PORT ST. LUCIE,, FL 34953 UN

FEI Number: 27-0297750

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POITIER, ANTHONY V SR
597 SW FELDMAN AVE
PORT ST. LUCIE, FL 34953 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: ANTHONY VINCENT POITIER SR.

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: POITIER, ANTHONY V SR.
Address: 597 SW FELDMAN AVE
City-St-Zip: PORT ST LUCIE, FL 34953

Title: MGRM
Name: POITIER, WENDY D
Address: 597 SW FELDMAN AVENUE
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: MGRM
Name: POITIER, SHOSHANA
Address: 597 SW FELDMAN AVENUE
City-St-Zip: PORT ST. LUCIE, FL 34953

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: ANTHONY V POITIER SR.

RA

10/06/2011

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