

2011 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L09000067853

FILED
Apr 28, 2011
Secretary of State

Entity Name: HEALTH CARE BROKERS LLC

Current Principal Place of Business:

208 BAYWIND DRIVE
NICEVILLE, FL 32578

New Principal Place of Business:

Current Mailing Address:

208 BAYWIND DRIVE
NICEVILLE, FL 32578

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERRY, SANDRA L
208 BAYWIND DRIVE
NICEVILLE, FL 32578 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: SANDRA BERRY

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: BERRY, WILLIAM R
Address: 208 BAYWIND DRIVE
City-St-Zip: NICEVILLE, FL 32578

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: WILLAM BERRY

MGMB

04/28/2011

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