

2010 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L09000082664

FILED
Oct 20, 2010
Secretary of State

Entity Name: RESTORATION SPECIFIC CHIROPRACTIC, LLC

Current Principal Place of Business:

12043 PHILLIPS ROAD
GROVELAND, FL 34736

New Principal Place of Business:

185 N. HIGHWAY 27
SUITE A
CLERMONT, FL 34711

Current Mailing Address:

12043 PHILLIPS ROAD
GROVELAND, FL 34736

New Mailing Address:

185 N. HIGHWAY 27
SUITE A
CLERMONT, FL 34711

FEI Number: 27-1137887

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIN, KEVIN
12043 PHILLIPS ROAD
GROVELAND, FL 34736 US

Name and Address of New Registered Agent:

JONES, BRET
700 ALMOND STREET
CLERMONT, FL 34711 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: BRET JONES

10/20/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: LIN, KEVIN
Address: 185 N. HIGHWAY 27, SUITE A
City-St-Zip: CLERMONT, FL 34711

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: KEVIN LIN

DR.

10/20/2010

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