

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000113294

Entity Name: ASCTG, LLC

**FILED**  
**Oct 11, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

108 VILLAGE SQUARE, SUITE 312  
SOMERS, NY 10589

**New Principal Place of Business:**

917 RINEHART RD  
ALLIANCE SURGICAL CENTER  
LAKE MARY, FL 32746 US

**Current Mailing Address:**

108 VILLAGE SQUARE, SUITE 312  
SOMERS, NY 10589

**New Mailing Address:**

917 RINEHART RD  
ALLIANCE SURGICAL CENTER  
LAKE MARY, FL 32746 US

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

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

WILLIAM, MENA  
917 RINEHART RD  
ALLIANCE SURGICAL CENTER  
LAKE MARY, FL 32746 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: WILLIAM MENA

10/11/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: PRES  
Name: WILLIAM, MENA  
Address: 917 RINEHART ROAD  
City-St-Zip: LAKE MARY, FL 32746

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: WILLIAM MENA

PRES

10/11/2011

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