

2012 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L10000008199

FILED
Oct 11, 2012
Secretary of State

Entity Name: COASTAL PALMS ANESTHESIA PROVIDERS, LLC

Current Principal Place of Business:

1732 ANNANDALE CIRCLE
ROYAL PALM BEACH, FL 33411

New Principal Place of Business:

4740 S OCEAN BLVD
1706
HIGHLAND BEACH, FL 33487

Current Mailing Address:

1732 ANNANDALE CIRCLE
ROYAL PALM BEACH, FL 33411

New Mailing Address:

4740 S OCEAN BLVD
1706
HIGHLAND BEACH, FL 33487

FEI Number: 27-1801643

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LENTZ, ROBERT E MD
1732 ANNANDALE CIRCLE
ROYAL PALM BEACH, FL 33411 US

Name and Address of New Registered Agent:

LENTZ, ROBERT E MD
4740 S OCEAN BLVD
1706
HIGHLAND BEACH, FL 33487 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: ROBERT LENTZ

10/11/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: LENTZ, ROBERT E MD
Address: 4740 S OCEAN BLVD
City-St-Zip: HIGHLAND BEACH, FL 33487

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: ROBERT LENTZ

PRES

10/11/2012

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