2011 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 03, 2011
Secretary of State

DOCUMENT# L10000016366

Entity Name: POOL NURSE LLC

Current Principal Place of Business:

16570 GOLDENROD LN.
#202
ALVA, FL 33920 US

New Principal Place of Business:

Current Mailing Address:

16570 GOLDENROD LN.
#202
ALVA, FL 33920 US

New Mailing Address:

P.O. BOX 51034
FT. MYERS, FL 33905 US

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WARNER, SHERRY L
16570 GOLDENROD LN.
#202
ALVA, FL 33920 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: SHERRY L. WARNER

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: WARNER, SHERRY L
Address: 16570 GOLDENROD LN. #202
City-St-Zip: ALVA, FL 33920 US

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 Statues.

SIGNATURE: SHERRY L. WARNER MGR 10/03/2011

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