

2012 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L10000041438

Entity Name: HOSPITAL TEAMCARE, LLC

FILED
Oct 31, 2012
Secretary of State

Current Principal Place of Business:

351 SOUTH CYPRESS ROAD
408
POMPANO BEACH, FL 33060 US

New Principal Place of Business:

Current Mailing Address:

351 SOUTH CYPRESS ROAD
408
POMPANO BEACH, FL 33060 US

New Mailing Address:

FEI Number: 27-2423175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOWE, M. SUNSHINE
351 SOUTH CYPRESS ROAD
408
POMPANO BEACH, FL 33060 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: MS LOWE

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: LOWE, M. SUNSHINE
Address: 351 SOUTH CYPRESS ROAD, SUITE 408
City-St-Zip: POMPANO BEACH, FL 33060 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 Statutes.

SIGNATURE: MS LOWE

MGR

10/31/2012

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