

2012 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L10000058154

FILED
Feb 28, 2012
Secretary of State

Entity Name: EXCELLENCE MEDICAL CENTERS, LLC

Current Principal Place of Business:

4406 SE 16TH PLACE
SUITE 104
CAPE CORAL, FL 33904

New Principal Place of Business:

Current Mailing Address:

4406 SE 16TH PLACE
SUITE 104
CAPE CORAL, FL 33904

New Mailing Address:

FEI Number: 27-2731289

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACKIE, CHRISTINE M
4406 SE 16TH PLACE
SUITE 104
CAPE CORAL, FL 33904 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: CHRISTINE M. MACKIE

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: MACKIE, CHRISTINE M
Address: 4406 SE 16TH PLACE SUITE 104
City-St-Zip: CAPE CORAL, FL 33904 US

Title: MGRM
Name: MARTINEZ, ERISDEL
Address: 4406 SE 16TH PLACE SUITE 104
City-St-Zip: CAPE CORAL, FL 33904 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: CHRISTINE M. MACKIE

MGRM

02/28/2012

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