

# 2011 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L10000061736

**FILED**  
**Sep 28, 2011**  
**Secretary of State**

**Entity Name:** HEALTH INSIGHTS OF SOUTH TAMPA, LLC

**Current Principal Place of Business:**

5020 4TH ST., N.  
ST. PETERSBURG, FL 33703

**New Principal Place of Business:**

**Current Mailing Address:**

3839 W KENNEDY BLVD  
TAMPA, FL 33609

**New Mailing Address:**

6752 29TH STREET S  
ST. PETERSBURG, FL 33712

FEI Number: 27-2836150

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JENKINS, JORYN  
3839 W KENNEDY BLVD  
TAMPA, FL 33609 US

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

PLATTNER, STEPHEN P  
6752 29TH STREET S  
ST. PETERSBURG, FL 33712 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: STEVE PLATTNER

09/28/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: PRES  
Name: PLATTNER, STEPHEN P  
Address: 6752 29TH STREET S  
City-St-Zip: ST. PETERSBURG, FL 33712

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: STEVE PLATTNER

PRES

09/28/2011

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