

2013 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L10000076036

FILED
Oct 31, 2013
Secretary of State

Entity Name: M & D HOME HEALTH CARE, LLC

Current Principal Place of Business:

1840 W. 49 STREET
SUITE 519
HIALEAH, FL 33012

New Principal Place of Business:

1840 W. 49 STREET
SUITE 519
HIALEAH, FL 33012 UN

Current Mailing Address:

1840 W. 49 STREET
SUITE 519
HIALEAH, FL 33012

New Mailing Address:

FEI Number: 65-0427642 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GELLER, DAVID ESQ.
15500 NEW BARN RD.
SUITE 104
MIAMI LAKES, FL 33014 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: MERCEDES LOPEZ

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: LOPEZ, MERCEDES
Address: 1840 W. 49 STREET SUITE 519
City-St-Zip: HIALEAH, FL 33012

Title: MGR
Name: BORGES, CARLOS
Address: 1840 W. 49 STREET SUITE 519
City-St-Zip: HIALEAH, FL 33012

Title: MGR
Name: VALDES, YADIRA
Address: 1840 W. 49 STREET SUITE 519
City-St-Zip: HIALEAH, FL 33012

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: MERCEDES LOPEZ

MGR

10/31/2013

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