

2012 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L10000091289

FILED
Oct 04, 2012
Secretary of State

Entity Name: COASTAL MEDICAL CARE, LLC

Current Principal Place of Business:

3530 FRUTIVILLE ROAD
SARASOTA, FL 34237

New Principal Place of Business:

Current Mailing Address:

3530 FRUTIVILLE ROAD
SARASOTA, FL 34237

New Mailing Address:

FEI Number: 27-3575329

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROSS STREET CORPORATE SERVICES LLC
200 SOUTH ORANGE AVENUE
SARASOTA, FL 34236 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: CHERYL C. PICKEN

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: PICKEN, CHERYL
Address: P.O. BOX 3558
City-St-Zip: SARASOTA, FL 34230

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: CHERYL C. PICKEN

PRES

10/04/2012

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