

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L11000042112

**FILED**  
**Oct 05, 2012**  
**Secretary of State**

**Entity Name:** BELLISIMA REHABILITATION CENTER LLC

**Current Principal Place of Business:**

7171 CORAL WAY  
205  
MIAMI, FL 33155

**New Principal Place of Business:**

**Current Mailing Address:**

7171 CORAL WAY  
205  
MIAMI, FL 33155

**New Mailing Address:**

**FEI Number:** 45-1593814

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

IBANEZ MARTINEZ, GISELLE  
1630 NW 18 ST  
MIAMI, FL 33125 US

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

IBANEZ MARTINEZ, GISELLE  
1 GLEN ROYAL PKWY  
1611  
MIAMI, FL 33125 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: GISELLE IBANEZ

10/05/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: IBANEZ MARTINEZ, GISELLE  
Address: 1 GLEN ROYAL PKWY # 1611  
City-St-Zip: MIAMI, FL 33125

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: GISELLE IBANEZ

MNGR

10/05/2012

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