

2014 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L11000133554

Entity Name: STILLPOINT CLINIC LLC

FILED
May 13, 2014
Secretary of State

Current Principal Place of Business:

8603 DIXIE HWY
306
PINECREST, FL 33143

New Principal Place of Business:

8603 DIXIE HWY
206
PINECREST, FL 33143

Current Mailing Address:

8603 DIXIE HWY
306
PINECREST, FL 33143

New Mailing Address:

8603 DIXIE HWY
206
PINECREST, FL 33143

FEI Number: 45-3907542

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOMITA, JUDY
8603 SOUTH DIXIE HWY
306
PINECREST, FL 33143 US

Name and Address of New Registered Agent:

TOMITA, JUDY
8603 SOUTH DIXIE HWY
206
PINECREST, FL 33143 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: JUDY TOMITA

05/13/2014

Electronic Signature of Registered Agent

Date

AUTHORIZED PERSONS:

Title: PRES
Name: TOMITA, JUDY
Address: 8603 SOUTH DIXIE HWY STE 206
City-St-Zip: PINECREST, FL 33143

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 authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: JUDY TOMITA

PRES

05/13/2014

Electronic Signature of Authorized Person

Date