

2014 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L12000048499

Entity Name: SAINNOVAL SURGICAL LLC

FILED
Oct 01, 2014
Secretary of State

Current Principal Place of Business:

245 NE 19TH DR
OKEECHOBEE, FL 34972 US

New Principal Place of Business:

Current Mailing Address:

245 NE 19TH DR
OKEECHOBEE, FL 34972 US

New Mailing Address:

FEI Number: 45-5008913

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TALAS, SUE
245 NE 19TH DR
OKEECHOBEE, FL 34972 US

Name and Address of New Registered Agent:

SAINNOVAL, GREGORY
245 NE 19TH DR
OKEECHOBEE, FL 34972 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: GREGORY SAINNOVAL

10/01/2014

Electronic Signature of Registered Agent

Date

AUTHORIZED PERSONS:

Title: MGRM
Name: SAINNOVAL, GREGORY
Address: 245 NE 19TH DR
City-St-Zip: OKEECHOBEE, FL 34972 US

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: GREGORY SAINNOVAL

MGRM

10/01/2014

Electronic Signature of Authorized Person

Date