

2013 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L12000085241

FILED
Oct 01, 2013
Secretary of State

Entity Name: TOPCARE PHARMACY #4 LLC

Current Principal Place of Business:

6484 FORT CAROLINE RD
JACKSONVILLE, FL 32277 US

New Principal Place of Business:

Current Mailing Address:

1951 ROSE MALLOW LN
FLEMING ISLAND, FL 32003 US

New Mailing Address:

FEI Number: 45-5601907

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLEGE, TAX & RETIREMENT STRATEGIES, LLC
3110 SPRING GLEN RD
JACKSONVILLE, FL 32207 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: LYUBA YOUNG

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: MYALIL, MAYA
Address: 1951 ROSE MALLOW LN
City-St-Zip: FLEMING ISLAND, FL 32003 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 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: MAYA MYALIL

MGRM

10/01/2013

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