

2013 LIMITED LIABILITY COMPANY REINSTATEMENT

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FILED
Oct 04, 2013
Secretary of State

Entity Name: FIRST CARE REHAB & RESEARCH CENTER, LLC.

Current Principal Place of Business:

3400 SW 130 AVENUE
MIAMI, FL 33175

New Principal Place of Business:

1840 W 49 STREET
304
HIALEAH, FL 33012

Current Mailing Address:

3400 SW 130 AVENUE
MIAMI, FL 33175

New Mailing Address:

1840 W 49 STREET
304
HIALEAH, FL 33012

FEI Number: 46-0950443

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOMEZ-CORTES, JOSE J M.D.
3400 SW 130 AVENUE
MIAMI, FL 33175 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: JOSE GOMEZ CORTES

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: GOMEZ-CORTES, JOSE J M.D.
Address: 3400 SW 130 AVENUE
City-St-Zip: MIAMI, FL 33175

Title: MGRM
Name: OBREGON, MARTA C
Address: 9745 S W 16 AVE
City-St-Zip: MIAMI, FL 33165

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: JOSE GOMEZ CORTES

MGRM

10/04/2013

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