

2014 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L13000084877

FILED
Dec 08, 2014
Secretary of State

Entity Name: HEALTHCARE ASSOCIATES OF CENTRAL FLORIDA LLC

Current Principal Place of Business:

1118 SOUTH ORANGE AVENUE
SUITE103
ORLANDO, FL 32806

New Principal Place of Business:

Current Mailing Address:

1118 SOUTH ORANGE AVENUE
SUITE103
ORLANDO, FL 32806

New Mailing Address:

FEI Number: 46-2973954

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYNG, JOSEPH E
150 EAST ROBINSON STREET
2801
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

CANCEL, DALYNES
1118 S. ORANGE AVE
SUITE 103
ORLANDO, FL 32806 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: DALYNES CANCEL

12/08/2014

Electronic Signature of Registered Agent

Date

AUTHORIZED PERSONS:

Title: MGRM
Name: MOUNTAIN, MATTHEW T DC
Address: 1118 SOUTH ORANGE AVENUE STE 103
City-St-Zip: ORLANDO, FL 32806

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: DALYNES CANCEL

MS

12/08/2014

Electronic Signature of Authorized Person

Date