

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L13000103876

**FILED**  
**Sep 30, 2014**  
**Secretary of State**

**Entity Name:** FLORIDA ANIMAL CAREER TRAINING SCHOOL, LLC

**Current Principal Place of Business:**

1800 SE INDIAN STREET  
STUART, FL 34997 US

**New Principal Place of Business:**

700 SE INDIAN STREET  
SUITE 730  
STUART, FL 34997 US

**Current Mailing Address:**

1800 SE INDIAN STREET  
STUART, FL 34997 US

**New Mailing Address:**

700 SE INDIAN STREET  
SUITE 730  
STUART, FL 34997 US

**FEI Number:** 46-3248221

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

HACKNEY LAW PA  
1061 EAST INDIANTOWN ROAD  
SUITE 400  
JUPITER, FL 33477 US

**Name and Address of New Registered Agent:**

HEIDI, FIELDER  
700 SE INDIAN STREET  
SUITE 730  
STUART, FL 34997 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: HEIDI I FIELDER

09/30/2014

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

Title: MGRM  
Name: FIELDER, HEIDI I  
Address: 700 SE INDIAN STREET, SUITE 730  
City-St-Zip: STUART, FL 34997 US

Title: MGRM  
Name: WASSERMAN, CINDY DVM, JD  
Address: 700 SE INDIAN STREET  
City-St-Zip: STUART, FL 34997

Title: MGRM  
Name: SALTZMAN, WILLIAM JD RET.  
Address: 700 SE INDIAN STREET, SUITE 730  
City-St-Zip: STUART, FL 34997

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: HEIDI I FIELDER

MGRM

09/30/2014

Electronic Signature of Authorized Person

Date