2010 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Jan 19, 2010
Secretary of State

DOCUMENT# L98000000014

Entity Name: CYPRESS DELRAY MEDICAL, L.C.

Current Principal Place of Business:

6646 WEST ATLANTIC AVENUE
DELRAY BEACH, FL 33446

New Principal Place of Business:

Current Mailing Address:

6646 WEST ATLANTIC AVENUE
DELRAY BEACH, FL 33446

New Mailing Address:

FEI Number: 65-0809598 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SABATES, GEORGE L
6646 W. ATLANTIC AVENUE, 3RD FLOOR
3RD FLOOR
DELRAY BEACH, FL 33446 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: GEORGE L SABATES

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: DELRAY MEDICAL ASSOCIATES, INC.
Address: 6646 WEST ATLANTIC AVENUE
City-St-Zip: DELRAY BEACH, FL 33446

Title: MGRM
Name: CYPRESS CREEK MEDICAL CENTER INC.
Address: 912 N.E. 62ND STREET
City-St-Zip: FORT LAUDERDALE, FL 33334

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 Statues.

SIGNATURE: GEORGE L SABATES PRES 01/19/2010

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