

# **2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L99000003001

**FILED**  
**Nov 09, 2007**  
**Secretary of State**

**Entity Name:** FORT LAUDERDALE HOSPITAL MANAGEMENT, L.L.C.

**Current Principal Place of Business:**

280 MADISON AVE SUITE 305  
NEW YORK, NY 10016

**New Principal Place of Business:**

**Current Mailing Address:**

280 MADISON AVE SUITE 305  
NEW YORK, NY 10016

**New Mailing Address:**

**FEI Number:** 65-0925118

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NATIONSCORP REGISTERED AGENTS, INC.  
1574 VILLAGE SQUARE BLVD  
SUITE 100  
TALLAHASSEE, FL 32309 US

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

REIBMAN, GENE ESQUIRE  
600 NORTHEAST THIRD AVENUE  
FORT LAUDERDALE, FL 33304 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: GENE REIBMAN, ESQUIRE

11/09/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: CURY, NEAL G  
Address: 1550 N.W. 101ST WAY  
City-St-Zip: PLANTATION, FL 33332

Title: MGRM ( ) Delete  
Name: AXON LIMITED PARTNERS, HIP  
Address: 14400 MARTIN DR.  
City-St-Zip: EDEN PRAIRIE, MN 55344

Title: MGRM ( ) Delete  
Name: BRADY, STEVE J  
Address: 2480 BRUEN LANE  
City-St-Zip: EASTON, PA 18040

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM (X) Change ( ) Addition  
Name: AXON I LIMITED PARTNE, RSHIP  
Address: 14400 MARTIN DR.  
City-St-Zip: EDEN PRAIRIE, MN 55344

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: RICHARD KRESCH FOR AXON I LIMITED PARTNERS

MGR

11/09/2007

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