

**2005 LIMITED LIABILITY COMPANY REINSTATEMENT**

**FILED  
Oct 10, 2005  
Secretary of State**

DOCUMENT# L99000009124

Entity Name: ROBERT R. MILES, D.O., P.L.

**Current Principal Place of Business:**

8625 66TH STREET NORTH  
PINELLAS PARK, FL 33782

**New Principal Place of Business:**

**Current Mailing Address:**

8625 66TH STREET NORTH  
PINELLAS PARK, FL 33782

**New Mailing Address:**

FEI Number: 59-3623361      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MILES, ROBERT R D.O.  
8625 66TH STREET NORTH  
PINELLAS PARK, FL 33782      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: ROBERT R. MILES

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: MILES, ROBERT D.O.  
Address: 8625 66TH STREET NORTH  
City-St-Zip: PINELLAS PARK, FL 33782

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT R. MILES

MGRM

10/10/2005

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