2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M00000001943

Entity Name: HEATHER HILL NURSING CENTER, LLC

FILED Oct 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6630 KENTUCKY AVE. NEW PORT RICHEY, FL 34653

Current Mailing Address: New Mailing Address:

6630 KENTUCKY AVE. NEW PORT RICHEY, FL 34653

FEI Number: 62-1832434 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NRAI SERVICES, INC. 2731 EXECUTIVE PARK DR., SUITE 4 WESTON, FL 33331 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: LESLIE LOFTON

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: () Change () Addition Name: BELL, JAMES ERIC Name:

Address: 6208 W CORPORATE OAKS DR Address:
City-St-Zip: CRYSTAL RIVER, FL 34429 City-St-Zip:

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 SWEENEY, ERIC P
 Name:
 SWEENEY, ERIC P

 Address:
 714 S CHURCH ST., SUITE A
 Address:
 206 FORTRESS BLVD

 City-St-Zip:
 MURFREESBORO, TN 37130
 City-St-Zip:
 MURFREESBORO, TN 37128

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 NEELY, WILLIAM H
 Name:
 NEELY, WILLIAM H

 Address:
 714 S CHURCH ST., SUITE A
 Address:
 206 FORTRESS BLVD

 City-St-Zip:
 MURFREESBORO, TN 37130
 City-St-Zip:
 MURFREESBORO, TN 31728

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 BLACKMAN, TONYA
 Name:
 JACKSON, BRIAN

 Address:
 6630 KENTUCKY AVE.
 Address:
 6630 KENTUCKY AVE.

City-St-Zip: NEW PORT RICHEY, FL 34653 City-St-Zip: NEW PORT RICHEY, FL 34653

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: JAMES ERIC BELL MGR 10/30/2009