

2012 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M04000003057

FILED
Apr 18, 2012
Secretary of State

Entity Name: CORRECT CARE SOLUTIONS, LLC

Current Principal Place of Business:

3343 PERIMETER HILL DRIVE, STE. 300
NASHVILLE, TN 37219

New Principal Place of Business:

1283 MURFREESBORO ROAD
500
NASHVILLE, TN 37217

Current Mailing Address:

3343 PERIMETER HILL DRIVE, STE. 300
NASHVILLE, TN 37219

New Mailing Address:

1283 MURFREESBORO ROAD
500
NASHVILLE, TN 37217

FEI Number: 32-0092573

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOSCH, JON
5860 NE 14TH WAY
FT LAUDERDALE, FL 33334 US

Name and Address of New Registered Agent:

BUSINESS FILINGS INCORPORATED
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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: BRENNALUTTER

04/18/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: BOYLE, GERARD
Address: 1283 MURFREESBORO ROAD, SUITE 500
City-St-Zip: NASHVILLE, TN 37217

Title: MGR
Name: MCCLURE, CARY
Address: 1283 MURFREESBORO ROAD, SUITE 500
City-St-Zip: NASHVILLE, TN 37217

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 Statutes.

SIGNATURE: GERARD BOYLE

MGR

04/18/2012

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