2008 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Apr 08, 2008
Secretary of State

DOCUMENT# M06000002273

Entity Name: UNIVERSITY MEDICAL OFFICE, LLC

Current Principal Place of Business:

31000 NORTHWESTERN HIGHWAY, SUITE 220
FARMINGTON HILLS, MI 48334

New Principal Place of Business:

31000 NORTHWESTERN HIGHWAY
SUITE 220
FARMINGTON HILLS, MI 48334

Current Mailing Address:

31000 NORTHWESTERN HIGHWAY, SUITE 220
FARMINGTON HILLS, MI 48334

New Mailing Address:

31000 NORTHWESTERN HIGHWAY
SUITE 220
FARMINGTON HILLS, MI 48334

FEI Number: 20-4597753 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NORTON, SAM D ESQUIRE
1819 MAIN STREET, SUITE 610
SARASOTA, FL 34236 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: SAM D. NORTON

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: UMO MANAGER, LLC,
Address: 31000 NORTHWESTERN HIGHWAY, SUITE 220
City-St-Zip: FARMINGTON HILLS, MI 48334

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 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: DAVID C. RUBIN MEM 04/08/2008

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