

2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000003013

FILED
Nov 22, 2010
Secretary of State

Entity Name: MAZLYNN HEALTHCARE SERVICES, INC.

Current Principal Place of Business:

1458 N.E. POST ROAD
MADISON, FL 32340 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 238
PINETTA, FL 32350 US

New Mailing Address:

1458 N.E. POST ROAD
MADISON, FL 32340 US

FEI Number: 03-0584724

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PUGH, BOBBY D
1458 NE POST ROAD
MADISON, FL 32340 US

Name and Address of New Registered Agent:

PUGH, BOBBY D MD
1458 NE POST ROAD
MADISON, FL 32340 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: BOBBY D. PUGH MD

11/22/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: PUGH, BOBBY D
Address: 1458 NE POST ROAD
City-St-Zip: MADISON, FL 32340 US

Title: VP
Name: DYKES, KENNETH E SR.
Address: 139 NW HAYNES STREET
City-St-Zip: MADISON, FL 32340

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BOBBY D. PUGH MD

P

11/22/2010

Electronic Signature of Signing Officer or Director

Date