

2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000108966

FILED
Oct 03, 2011
Secretary of State

Entity Name: ST. MICHAEL MEDICAL CENTER, INC.

Current Principal Place of Business:

620 NE 128TH STREET
NORTH MIAMI, FL 33161

New Principal Place of Business:

12595 NE 7TH AVE.
NORTH MIAMI, FL 33161

Current Mailing Address:

620 NE 128TH STREET
NORTH MIAMI, FL 33161

New Mailing Address:

12595 NE 7TH AVE.
NORTH MIAMI, FL 33161

FEI Number: 01-0554085

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEMAIRE, JOSEPH M
620 NE 128TH STREET
NORTH MIAMI, FL 33161 US

Name and Address of New Registered Agent:

LEMAIRE, JOSEPH M
12595 NE 7TH AVE.
NORTH MIAMI, FL 33161 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: JOSEPH LEMAIRE

10/03/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: LEMAIRE, JOSEPH M
Address: 12595 NE 7TH AVE.
City-St-Zip: NORTH MIAMI, FL 33161

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOSEPH M. LEMAIRE

PD

10/03/2011

Electronic Signature of Signing Officer or Director

Date