2012 FOR PROFIT CORPORATION REINSTATEMENT

FILED
May 24, 2012
Secretary of State

DOCUMENT# P02000083616

Entity Name: BACK PAIN INSTITUTE OF WEST FLORIDA, P.A.

Current Principal Place of Business:

5221 26TH STREET WEST
BRADENTON, FL 34207

New Principal Place of Business:

5221 26TH STREET WEST
BRADENTON, FL 34207 UN

Current Mailing Address:

5221 26TH STREET WEST
BRADENTON, FL 34207

New Mailing Address:

5221 26TH STREET WEST
BRADENTON, FL 34207 UN

FEI Number: 54-2079134 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BENEDICT, DAVID
707 67TH AVENUE WEST
BRADENTON, FL 34207 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: DAVID BENEDICT 05/24/2012
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: ADERHOLDT, CRAIG S
Address: 5221 26TH STREET WEST
City-St-Zip: BRADENTON, FL 34207

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: CRAIG S. ADERHOLDT P 05/24/2012
Electronic Signature of Signing Officer or Director Date