

2012 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000101480

FILED
Dec 05, 2012
Secretary of State

Entity Name: MITCH P. FEARING, M.D., P.A.

Current Principal Place of Business:

14819 NW 140TH ST
ALACHUA, FL 32615

New Principal Place of Business:

14819 NW 140TH STREET
ALACHUA, FL 32615

Current Mailing Address:

P.O. BOX 580
ALACHUA, FL 32616

New Mailing Address:

14819 NW 140TH STREET
ALACHUA, FL 32616

FEI Number: 20-0240352

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FEARING, MITCHEL M.D.
8214 SW 16TH PL
GAINESVILLE, FL 32607 US

Name and Address of New Registered Agent:

FEARING, MITCHEL M.D.
8214 SW 16TH PLACE
GAINESVILLE, FL 32607 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: MITCH P. FEARING

12/05/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DR.
Name: FEARING, MITCH P
Address: 14819 NW 140TH ST
City-St-Zip: ALACHUA, FL 32615

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: MITCH P. FEARING

DR.

12/05/2012

Electronic Signature of Signing Officer or Director

Date