2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000014833

Entity Name: MICHAEL A. ARSENAULT, M.D., P.A.

FILED Oct 18, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
SUITE 260	ITVILLE ROAD) A, FL 34237)			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
SUITE 390		CH BOULEVARD L 34202			
FEI Number:	: 20-0651344	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
8340 LAKE SUITE 390		CH BOULEVARD			
	named entity e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE: EMILY A	RSENAULT, MD			
	Electro	nic Signature of Registered Ag	gent	Date	
		3(2)(b), F.S., the corporation did r	not receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	ARSENAULT, I 8340 LAKEWO) Delete /IICHAEL A MD OD RANCH BOULEVARD, SUITE 39 ANCH, FL 34202	Title: Name: 90 Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICHAEL ARSENAULT, MD PRES 10/18/2006