2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000008865

18851 NE 29TH AVENUE STE 900

AVENTURA, FL 33180 US

Address: City-St-Zip:

FILED Dec 18, 2009 Secretary of State

Entity Name: SERENITY AT NAPLES, INC. **Current Principal Place of Business: New Principal Place of Business:** 18851 NE 29TH AVENUE STE 900 AVENTURA, FL 33180 **New Mailing Address: Current Mailing Address:** 18851 NE 29TH AVENUE STE 900 AVENTURA, FL 33180 US FEI Number: 20-2198893 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ROTH, LEONARDO A ESQ MELLINGER, DARIN WADE ESQUIRE **18851 NE 29TH AVENUE** 1200 NORTH FEDERAL HIGHWAY STE 900 SUITE 200 AVENTURA, FL 33180 US BOCA RATON, FL 33432 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: DARIN WADE MELLINGER 12/18/2009 Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition HORIGIAN, FERNANDO Name: Name: 18851 NE 29TH AVENUE STE 900 Address: Address: City-St-Zip: AVENTURA, FL 33180 US City-St-Zip: () Delete Title: DV Title: () Change () Addition SANTURIAN, RUBEN Name: Name: 18851 NE 29TH AVENUE STE 900 Address: Address: AVENTURA, FL 33180 US City-St-Zip: City-St-Zip: Title: Title: DT () Delete () Change () Addition ELBAUM, SERGIO Name: Name:

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: SERGIO ELBAUM DT 12/18/2009