2013 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 09, 2013
Secretary of State

DOCUMENT# P06000002841

Entity Name: THERAPEUTIC ALLIANCE COMMUNITY MENTAL HEALTH CENTER, INC.

Current Principal Place of Business:

6405 NW 36 STREET #100
VIRGINIA GARDEN, FL 33166

New Principal Place of Business:

6405 NW 36 STREET #100
VIRGINIA GARDENS, FL 33166

Current Mailing Address:

6405 NW 36 STREET #100
VIRGINIA GARDEN, FL 33166

New Mailing Address:

6405 NW 36 STREET #100
VIRGINIA GARDENS, FL 33166

FEI Number: 20-4075597 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BODAN, DAYRA
6405 NW 36 ST
SUITE 100
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

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: DAYRA BODAN
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PVST
Name: BODAN, DAYRA
Address: 6405 NW 36 ST #100
City-St-Zip: VIRGINIA GARDENS, FL 33166

Title: D
Name: BODAN, DAYRA
Address: 6405 NW 36 ST #100
City-St-Zip: VIRGINIA GARDENS, FL 33166

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: DAYRA BODAN PSYD 10/09/2013
Electronic Signature of Signing Officer or Director — Date