2011 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Dec 22, 2011
Secretary of State

DOCUMENT# P06000081701

Entity Name: TRUEBLUE ANESTHESIA, P.A.

Current Principal Place of Business:

4900 62ND AVE S
ST PETERSBURG, FL 33715

New Principal Place of Business:

1133 16TH AVE N
ST PETERSBURG, FL 33704 FL

Current Mailing Address:

4900 62ND AVE S
ST PETERSBURG, FL 33715

New Mailing Address:

1133 16TH AVE N
ST PETERSBURG, FL 33704 FL

FEI Number: 02-0780074 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRAFFORD, KAREN
4900 62ND AVE S
ST PETERSBURG, FL 33715 US

Name and Address of New Registered Agent:

BRAFFORD, KAREN
1133 16TH AVE N
ST PETERSBURG, FL 33704 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: KAREN S BRAFFORD 12/22/2011
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PST
Name: BRAFFORD, KAREN
Address: 1133 16TH AVE N
City-St-Zip: ST PETERSBURG, FL 33704 US

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: KAREN S BRAFFORD PST 12/22/2011
Electronic Signature of Signing Officer or Director Date