

2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000020086

FILED
Oct 30, 2011
Secretary of State

Entity Name: JACKSONVILLE PROVIDER SERVICES INC

Current Principal Place of Business:

12348 GLENN HOLLOW DR
JACKSONVILLE, FL 32226

New Principal Place of Business:

13453 N MAIN ST
STE 305 C
JACKSONVILLE, FL 32218

Current Mailing Address:

12348 GLENN HOLLOW DR
JACKSONVILLE, FL 32226

New Mailing Address:

13453 N MAIN ST
STE 305 C
JACKSONVILLE, FL 32218

FEI Number: 20-8445365

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIVERA, HEIDI
12348 GLENN HOLLOW DR
JACKSONVILLE, FL 32226 US

Name and Address of New Registered Agent:

RIVERA, HEIDI
14603 ZACHARY DR
JACKSONVILLE, FL 32218 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: HEIDI RIVERA

10/30/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: RIVERA, JUAN P
Address: 14603 ZACHARY DR
City-St-Zip: JACKSONVILLE, FL 32218

Title: VP
Name: RIVERA, HEIDI
Address: 14603 ZACHARY DR
City-St-Zip: JACKSONVILLE, FL 32218

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: HEIDI RIVERA

VP

10/30/2011

Electronic Signature of Signing Officer or Director

Date