2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000030444

Entity Name: SOTHEN PHYSICAL THERAPY, INC.

FILED Jan 15, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

4993 HEARTLAND ST. 3882 BLUEBELL STREET

ORLANDO, FL 32829 US PALM BEACH GARDENS, FL 33410 US

Current Mailing Address: New Mailing Address:

4993 HEARTLAND ST. 3882 BLUEBELL STREET

ORLANDO, FL 32829 US PALM BEACH GARDENS, FL 33410 US

FEI Number: 20-8595950 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:

SOTHEN, RICHARD JR.

4993 HEARTLAND ST.

SOTHEN, RICHARD JR.

3882 BLUEBELL STREET

ORLANDO, FL 32829 US PALM BEACH GARDENS, FL 33410 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: DAWN SOTHEN 01/15/2009

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:

Title:

() Delete Title: P (X) Change () Addition

Name:SOTHEN, RICHARD JR.Name:SOTHEN, RICHARD JR.Address:4993 HEARTLAND ST.Address:3882 BLUEBELL STREET

City-St-Zip: ORLANDO, FL 32829 US City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: VP () Delete Title: VP (X) Change () Addition Name: SOTHEN, DAWN Name: SOTHEN, DAWN

Address: 4993 HEARTLAND ST. Address: 3882 BLUEBELL STREET

City-St-Zip: ORLANDO, FL 32829 US City-St-Zip: PALM BEACH GARDENS, FL 33410 US

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.

SIGNATURE: DAWN SOTHEN VP 01/15/2009