

2012 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000057072

FILED
Apr 30, 2012
Secretary of State

Entity Name: BROWNING PAIN MANAGEMENT, PA

Current Principal Place of Business:

790 SANTA ROSA BLVD
#404
FORT WALTON BEACH, FL 32548

New Principal Place of Business:

Current Mailing Address:

790 SANTA ROSA BLVD
#404
FORT WALTON BEACH, FL 32548

New Mailing Address:

FEI Number: 26-2778666

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PITELL, LISA Y
4400 E HWY 20
SUITE 206
NICEVILLE, FL FL 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: LISA PITELL

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P.S
Name: BROWNING, JAMES L MD
Address: 790 SANTA ROSA BLVD
City-St-Zip: FT WALTON BEACH, FL 32548

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: JAMES BROWNING

P.S.

04/30/2012

Electronic Signature of Signing Officer or Director

Date