2014 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P09000102472

Entity Name: COMPLETE MEDICAL CARE ASSOCIATES, INC

FILED Sep 10, 2014 Secretary of State

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

7400 N. KENDALL DR., STE. 518 12955 SW 42 STREET MIAMI, FL 33156 US SUITE 10

MIAMI, FL 33175 US

Current Mailing Address: New Mailing Address:

7400 N. KENDALL DR., STE. 518 12955 SW 42 STREET MIAMI, FL 33156 US SUITE 10

MIAMI, FL 33175 US

FEI Number: 27-1545871 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:

 VILLALBA, LOUIS D
 VILLALBA, LOUIS D

 3132 SW 132 PL
 12955 SW 42 STREET

 MIAMI, FL 33175 US
 SUITE 10

 MIAMI, FL 33175 US
 MIAMI, FL 33175 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: LOUIS VILLALBA 09/10/2014

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

Name: VILLALBA, LOUIS D

Address: 12955 SW 42 STREET SUITE 10

City-St-Zip: MIAMI, FL 33175 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: LOUIS D. VILLALBA P 09/10/2014