## 2014 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P11000042142

Entity Name: OPD HEALTHCARE HOSPITALISTS INC

FILED Oct 15, 2014 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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7905 PRESERVE CIR APT 131 NAPLES, FL 34119 U

Current Mailing Address: New Mailing Address:

7905 PRESERVE CIR APT 131 NAPLES, FL 34119 US

FEI Number: 45-2081258 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPL INCOME TAX CORP 6006 RADIO RD NAPLES, FL 34104 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: FERNANDO ODE

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

 Name:
 RONCAL, NOEL O

 Address:
 7905 PRESERVE CIR #131

 City-St-Zip:
 NAPLES, FL 34119

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: NOEL O RONCAL OWNE 10/15/2014