2014 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 01, 2014
Secretary of State

DOCUMENT# P12000030365

Entity Name: SOUTH FLORIDA PHYSICIAN CARE NETWORK P.A.

Current Principal Place of Business:

1275 W 47TH PL
SUITE 307
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

1275 W 47TH PL
SUITE 307
HIALEAH, FL 33012

New Mailing Address:

FEI Number: 45-4920532 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SANDOVAL, OSWALDO S
1275 W 47TH PL
SUITE 307
HIALEAH, FL 33013 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: OSWALDO S SANDOVAL

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DPT
Name: SANDOVAL, OSWALDO S
Address: 1275 W 47TH PL SUITE 307
City-St-Zip: HIALEAH, FL 33012

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: OSWALDO S SANDOVAL DPT 10/01/2014

Electronic Signature of Signing Officer or Director — Date