2013 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P12000103537

Entity Name: BOBBY O'CONNOR, M.D., P.A.

FILED Oct 15, 2013 Secretary of State

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

12451 POPASH CT.

N. FORT MYERS, FL 33903

1858 WHITECAP CIRCLE
N. FORT MYERS, FL 33903

N. FORT MYERS, FL 33903

Current Mailing Address: New Mailing Address:

12451 POPASH CT.

N. FORT MYERS, FL 33903

1858 WHITECAP CIRCLE
N. FORT MYERS, FL 33903

FEI Number: 46-1679209 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:

O'CONNOR, ROBERT M.D.

12451 POPASH CT
N. FORT MYERS, FL 33903 US

O'CONNOR, ROBERT M.D.

1858 WHITECAP CIRCLE
N. FORT MYERS, FL 33903 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: ROBERT O'CONNOR MD 10/15/2013

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: CEC

 Name:
 O'CONNOR, ROBERT E MD

 Address:
 1858 WHITECAP CIRCLE

 City-St-Zip:
 NORTH FORT MYERS, FL 33903

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: ROBERT E O'CONNOR CEO 10/15/2013