2013 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Dec 09, 2013
Secretary of State

DOCUMENT# P12000104228

Entity Name: PHYSICAL HEALTHCARE OF JACKSONVILLE, INC

Current Principal Place of Business:

12620-6 BEACH BLVD
JACKSONVILLE, FL 32246 US

New Principal Place of Business:

Current Mailing Address:

12620-6 BEACH BLVD
JACKSONVILLE, FL 32246 US

New Mailing Address:

FEI Number: 46-1666015 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PIERCE, MARK A SR
12620-6 BEACH BLVD
JACKSONVILLE, FL 32246 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: MARK A PIERCE

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DR.
Name: PIERCE, MARK A SR
Address: 12620-6 BEACH BLVD
City-St-Zip: JACKSONVILLE, FL 32246

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: MARK A PIERCE, D.C. DR. 12/09/2013

Electronic Signature of Signing Officer or Director — Date