2014 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Sep 30, 2014
Secretary of State

DOCUMENT# P13000099883

Entity Name: BEST OF CARE MEDICAL SERVICES II INC.

Current Principal Place of Business:

2124 NORTHWEST 102TH TERRACE
CORAL SPRINGS, FL 33071 US

New Principal Place of Business:

Current Mailing Address:

2124 NORTHWEST 102TH TERRACE
CORAL SPRINGS, FL 33071 US

New Mailing Address:

FEI Number: 45-4339596 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GOMBERG, KAY
2124 NORTHWEST 102TH TERRACE
CORAL SPRINGS, FL 33071 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: KAY GOMBERG

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P, D
Name: GOMBERG, ARTHUR
Address: 2124 NORTHWEST 102TH TERRACE
City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: S, T
Name: GOMBERG, ARTHUR
Address: 2124 NORTHWEST 102TH TERRACE
City-St-Zip: CORAL SPRINGS, FL 33071 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: ARTHUR A GOMBERG P 09/30/2014

Electronic Signature of Signing Officer or Director Date