APPLICATION FOR REINSTATEMENT  DOCUMENT #POCON Secretary of State DATE OF STATE Secretary of State DATE OF STATE SECRETARY OF STATE TALLAHASSEE. FLORIDA  A Dag IN DECENSION OF	PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.							
DOCUMENT # 27 COUNTY  1. Composion happen PVIL Land Holding Co.  REINSTATEMENT OF STATE TALLAHASSEE. FLORIDA  REINSTATEMENT OF STATE TALLAHASSEE. FLORIDA  REINSTATEMENT OF  R		PLICATION FOR	OA DEPARTMENT OF STATE  Sandra B. Mortham  Secretary of State		1			
PVL Land Bolding Co.    Secretary Of State   Florida Co.   Secretary	DIVISION OF CORPORATIONS					1	I has been led	
Findpal Place of Business 3900 University Boulevard South Jacksonville, FL 32216    Jacksonville						98 NOV -2 PM 1: 44		
Substance   Subs	PVL Land Holding Co.					SECRETARY OF STATE TALLAHASSEE. FLORIDA		
2. New Principal Office Address, If Applicable  Suite, Apt. 4, etc.  City & Siste  Cov & Siste  Country  Country  Country  Country  Thie(a)  Names and Street Addresses of Each Officer and for Director (Florida nonyroll desponations must list at least of Sectors)  Street Address of Each  Street Address of Each  Cov Nort Use Post Office Res Numbers  Description of Cover Use Post Office Res Numbers In Numbers  Description of Cover Use Post Office Res Numbers  Description of Cover Use Post Office Res Numbers In Numbers  Description of Cover Use Post Office Res Numbers In Numbers  Description of Cover Use Post Office Res Numbers In Numbers  Description of Cover Use Post Office Res Numbers In Numbers  Description of Cover Office Res N	3900 University Boulevard South					1		
Suite, Apt. 1, etc.    Suite, Apt. 1, etc.   Suite, Apt. 1, etc.	If above addresses are incorrect in any way, line through incorrect information and enter correction below.							
S. FEI Number	L				To Do Business in Florida			
Country   Zip   Country   Zip   Country   Centricate of Status Designed   State Addresses of Each Officer and/or Director (Florida nonprofit corporations misst list at least 3 directors)   Title(t)   2   Andro Directors   3   Convol Leaf Post Officer and/or Directors   3   Convol Leaf Post Officer and/or Directors   3   Convol Leaf Post Office Sea Numbers)   4   City / State / Zip   Convol Leaf Post Office Sea Numbers   4   City / State / Zip   Convol Leaf Post Office Sea Numbers   4   City / State / Zip   Convol Leaf Post Office Sea Numbers   4   City / State / Zip   Convol Leaf Post Office Sea Numbers   4   City / State / Zip   City / State / Zip   Convol Leaf Post Office Sea Numbers   4   City / State / Zip   City / State / Zip   Convol Leaf Post Office Sea Numbers   4   City / State / Zip				, etc.		5. FEI Number Applied For		
This corporation of the above named corporation, and familiar with and accept the obligations of Section 607. Names and Street Address of Each Officer and/or Directors (Florida nonprofit deporations must list at least 3 directors)  Name of Officers and/or Directors Street Address of Each Officer and Officers and Off				Country		6.	50 75 August and E	
Title(s) 2 Name of Officers and/or Directors 3 OON OF Street Address of Each Officer and/or Directors 3 OON OF Street Address of Each Officer and/or Directors 4 City/State/Zp  D Chinoy, David A. M.D. 3900 University Blvd. South Jacksonville, FL 32216  D Geer, Vasco R. M.D. 3900 University Blvd. South Jacksonville, FL 32216  D Haught, W. Herbert M.D. 3900 University Blvd. South Jacksonville, FL 32216  D Holthaus, Keven M. M.D. 3900 University Blvd. South Jacksonville, FL 32216  D Koren, Michael J. M.D. 3900 University Blvd. South Jacksonville, FL 32216  D Lohrbauer, Leif A. M.D. 3900 University Blvd. South Jacksonville, FL 32216  D Lohrbauer, Leif A. M.D. 3900 University Blvd. South Jacksonville, FL 32216  S. Name and Address of Current Registered Agent Number of Michael J. Koren, M.D. 3900 University Blvd. South Jacksonville, FL 32216  Michael J. Koren, M.D. 3900 University Blvd. South Jacksonville, FL 32216  Michael J. Koren, M.D. Street Address (PC. Box Number is Not Acceptable) 3900 University Blvd. South Jacksonville, FL 32216  D Lohrbauer of Post Number is Not Acceptable) 3900 University Blvd. South Jacksonville, FL 32216  Michael J. Koren, M.D. Street Address (PC. Box Number is Not Acceptable) 3900 University Blvd. South Jacksonville, FL 32216  D Lohrbauer of Post Number is Not Acceptable) 3900 University Blvd. South Jacksonville, FL 32216  Michael J. Koren, M.D. Street Address (PC. Box Number is Not Acceptable) 3900 University Blvd. South Sulle, Apl. 4, Elc. Street Address (PC. Box Number is Not Acceptable) 3900 University Blvd. South Sulle, Apl. 4, Elc. Street Address (PC. Box Number is Not Acceptable) 3900 University Blvd. South Sulle, Apl. 4, Elc. Street Address (PC. Box Number is Not Acceptable) 3900 University Blvd. South Sulle, Apl. 4, Elc. Street Address (PC. Box Number is Not Acceptable) 3900 University Blvd. South Sulle, Apl. 4, Elc. Street Address (PC. Box Number is Not Acceptable) 3900 University Blvd. South Sulle, Apl. 4, Elc. Street Address (PC. Box Number is Not Acceptable) 3900 University				CERTIFICATE OF STATUS DESI		E OF STATUS DESIRED TILL for a Certificate of Status		
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D Haught, W. Herbert M.D. 3900 University Blvd. South Jacksonville, FL 32216  D Holthaus, Keven M. M.D. 3900 University Blvd. South Jacksonville, FL 32216  D Koren, Michael J. M.D. 3900 University Blvd. South Jacksonville, FL 32216  D Lohrbauer, Leif A. M.D. 3900 University Blvd. South Jacksonville, FL 32216  3. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Michael J. Koren, M.D. 3900 University Blvd. South Jacksonville, FL 32216  3900 University Blvd. South Steet Address (P.O. Box Number is Not Acceptable) 3900 University Blvd. South Jacksonville, FL 32216  3900 University Blvd. South Steet Address (P.O. Box Number is Not Acceptable) 3900 University Blvd. South South Jacksonville, FL 32216  10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.  Signature of Registered Agent Registered Registered Registered Registered Registered Registered Registered Registered	D	Chinoy, David A. M.D.		3900 Univ	ersity Blvd	. South	Jacksonville, FL 32216	
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Michael J. Koren, M.D.  3900 University Blvd. South Jacksonville, FL 32216  Street Address (P.O. Box Number is Not Acceptable)  3900 University Blvd. South Suite, Apt. #, Etc.  City Jacksonville  REGISTERED AGENT MUST SIGN  11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.  12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid any five names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, are my signature shall have the same legal effect as if made under oath.  SIGNATURE:	ם	Lohrbauer, Leif A. M.D. 3900 Univer			ersity Blvd	South	Jacksonville, FL 32216	
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Suite, Apt. #, Etc.    City	3900 University Blvd. South				Street Address (F	Street Address (P.O. Box Number is Not Acceptable)		
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