

**2017 FLORIDA PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P16000092152

**Entity Name:** LIFEOCARE INCORPORATED

**Current Principal Place of Business:**

14124 N CYPRESS COVE CIRCLE  
DAVIE, FL 33325

**Current Mailing Address:**

14124 N CYPRESS COVE CIRCLE  
DAVIE, FL 33325

**FEI Number:** 81-4553072

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

THOMAS, JIMMY  
14124 N CYPRESS COVE CIRCLE  
DAVIE, FL 33325 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:** JIMMY THOMAS

11/28/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name THOMAS, JIMMY  
Address 14124 N CYPRESS COVE CIRCLE  
City-State-Zip: DAVIE FL 33325

Title VP  
Name ABRAHAM, TOBIN  
Address 14124 N CYPRESS COVE CIRCLE  
City-State-Zip: DAVIE FL 33325

*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:** JIMMY THOMAS

**PRESIDENT**

11/28/2017

Electronic Signature of Signing Officer/Director Detail

Date