

2023 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000109761

Entity Name: HCR MANORCARE MEDICAL SERVICES OF FLORIDA, LLC

Current Principal Place of Business:

333 N. SUMMIT STREET
TOLEDO, OH 43604

Current Mailing Address:

100 MADISON AVE.
TOLEDO, OH 43604 US

FEI Number: 65-0666550

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: SEAN L. EMRICK, ASST. SECRETARY

10/20/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AR
Name PILE, LUKE
Address 100 MADISON AVE.
City-State-Zip: TOLEDO OH 43604

Title AR
Name ROBERTS, TIMOTHY
Address 100 MADISON AVE.
City-State-Zip: TOLEDO OH 43604

Title AR
Name RODGERS, DAMIAN M.P.
Address 100 MADISON AVE.
City-State-Zip: TOLEDO OH 43604

Title AR
Name ALLEN, MARTIN
Address 100 MADISON AVE.
City-State-Zip: TOLEDO OH 43604

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DAMIAN M.P. RODGERS

AR

10/20/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date