

# 2013 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000023397

**FILED**  
**Sep 30, 2013**  
**Secretary of State**

**Entity Name:** LANDLINK GROUP, LLC

**Current Principal Place of Business:**

16204 N. NEBRASKA AVE  
SUITE G  
LUTZ, FL 33549 US

**New Principal Place of Business:**

16204 N. NEBRASKA AVE  
SUITE A  
LUTZ, FL 33549 US

**Current Mailing Address:**

16204 N. NEBRASKA AVE  
SUITE G  
LUTZ, FL 33549 US

**New Mailing Address:**

16204 N. NEBRASKA AVE  
SUITE A  
LUTZ, FL 33549 US

**FEI Number:** 20-4425723

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GIOVINCO, IAN S  
16017 N FLORIDA AVE  
SUITE 125  
LUTZ, FL 33549 US

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

AZIZ, STEFFEN  
16204 N. NEBRASKA AVE  
SUITE A  
LUTZ, FL 33549 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: STEFFEN AZIZ

09/30/2013

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: AZIZ, STEFFEN  
Address: 16204 N. NEBRASKA AVE., SUITE A  
City-St-Zip: LUTZ, FL 33549 US

Title: MGRM  
Name: SOTOMAYOR, NATALIE J  
Address: 28727 DARBY ROAD  
City-St-Zip: DADE CITY, FL 33525

Title: MGRM  
Name: STROMSNES, TIMOTHY B  
Address: 2313 TOWERLY TRAIL  
City-St-Zip: LUTZ, FL 33549 US

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: STEFFEN AZIZ

MGRM

09/30/2013

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date