

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000115725

**FILED**  
**Nov 26, 2008**  
**Secretary of State**

**Entity Name:** LINDSTROM CONSULTING, INC.

**Current Principal Place of Business:**

3119 WEST DE LEON ST. #11  
TAMPA, FL 33609

**New Principal Place of Business:**

502 S WILLOW AVE  
#2  
TAMPA, FL 33606

**Current Mailing Address:**

POST OFFICE BOX 1231  
TALLAHASSEE, FL 32302

**New Mailing Address:**

FEI Number: 26-1287784

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FALK, ERIC A ESQ.  
7000 SW 97TH AVENUE  
SUITE 210  
MIAMI, FL 33173 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: ERIC A. FALK

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PO ( ) Delete  
Name: LINDSTROM, RICHARD A  
Address: POST OFFICE BOX 1231  
City-St-Zip: TALLAHASSEE, FL 32302

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RICHARD LINDSTROM

PO

11/26/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date