

**2015 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L13000120743

**Entity Name:** CONSCIENTIOUS SOLUTION/LEARNING CENTER LLC

**Current Principal Place of Business:**

225 W. SEMINOLE BLVD  
SUITE 401  
SANFORD FL, FL 32771

**Current Mailing Address:**

225 W. SEMINOLE BLVD  
SUITE 401  
SANFORD , FL 32771 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** Yes

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

GREENE, CHARLENE  
641 RIDGEWOOD ST  
ALTAMONTE SPRINGS, FL 32701 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:** CHARLENE GREENE

06/22/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name GREENE, CHARLENE  
Address 641 RIDGEWOOD ST  
City-State-Zip: ALTAMONTE SPRINGS FL 32701

*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:** CHARLENE GREENE

OWNER

06/22/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date