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.

MGR

SIGNATURE: MARK ST. PIERRE

Electronic Signature of Signing Authorized Person(s) Detail

2019 FLORIDA LIMITED	LIABILITY COM	IPANY REINSTATEMENT

DOCUMENT# L16000126151

Entity Name: MARK SQUARED CONSULTING MANAGEMENT GROUP, LLC

Current Principal Place of Business:

350 E. LAS OLAS BLVD. **SUITE 1750** FT. LAUDERDALE, FL 33301

Current Mailing Address:

350 E. LAS OLAS BLVD. **SUITE 1750** FT. LAUDERDALE, FL 33301 US

FEI Number: 81-3263609

Name and Address of Current Registered Agent:

BERMAN, MARK 350 E. LAS OLAS BLVD. **SUITE 1750** FT. LAUDERDALE, FL 33301 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	MARK BERMAN			01/07/2019		
	Electronic Signature of Registered Agent		Date			
Authorized Person(s) Detail :						
Title	MGR	Title	AMBR			
Name	ST. PIERRE, MARK	Name	BERMAN, MARK			
Address	350 E. LAS OLAS BLVD. SUITE 1750	Address	350 E. LAS OLAS BLVD. SUITE 1750			
City-State-Zip:	FT. LAUDERDALE FL 33301	City-State-Zip:	FT. LAUDERDALE FL 33301			

Certificate of Status Desired: No

FILED Jan 07, 2019 Secretary of State 0372234070CR