

# 2005 LIMITED PARTNERSHIP REINSTATEMENT

DOCUMENT# A04000001256

FILED  
Nov 08, 2005  
Secretary of State

**Entity Name:** QUALITY REVIEW SYSTEMS LLLP

**Current Principal Place of Business:**

1093 A1A BEACH BLVD  
PMB 257  
ST. AUGUSTINE, FL 32080 US

**New Principal Place of Business:**

**Current Mailing Address:**

1093 A1A BEACH BLVD  
PMB 257  
ST. AUGUSTINE, FL 32080 US

**New Mailing Address:**

**FEI Number:** 20-1441359 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

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

BARGER, JILL S  
633 MARY JANE LANE  
ST. AUGUSTINE, FL 32086 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Capital Contributions as Shown on record:** 0.00  
**Amount of Capital Contributions in Florida to date:** 0.00

**GENERAL PARTNER INFORMATION:**

Document #:  
Name: SAMUELS, ANDREA S  
Address: 1093 A1A BEACH BLVD  
City-St-Zip: ST. AUGUSTINE, FL 32080 US  
Document #:  
Name: BHIDE, VANDANA  
Address: 150 MARINE STREET  
City-St-Zip: ST. AUGUSTINE, FL 32086 US

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:  
  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: ANREA SAMUELS

GP

11/08/2005

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date