

L00000012543

LIMITED LIABILITY COMPANY REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

02 NOV 25 AM 11:36

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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 11/25/02--01040--009 **150.00

DOCUMENT # **L00000012543**
 1. Limited Liability Company's Name
DALLAS CONSULTING LLC

2. Principal Office Address GULF 19823 GULF BLVD *38		3. Mailing Office Address 19823 GULF BLVD	
Suite, Apt. #, etc. * 38		Suite, Apt. #, etc. * 38	
City & State INDIAN SHORES FL		City & State INDIAN SHORES FL	
Zip 33785	Country USA	Zip 33785	Country USA

4. State/Country of Formation	
5. Date Organized or Qualified To Do Business in Florida	
6. FBI Number	Applied For <input checked="" type="checkbox"/> Not Applicable
7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	

8. Name and Address of Current Registered Agent

Name
LINDSEY NOBLE

Street Address (P.O. Box Number is Not Acceptable)
19823 GULF BLVD

Suite, Apt. #, Etc.
*** 38**

City
INDIAN SHORES

State
FL

Zip Code
33785

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of Registered Agent *Lindsey Noble* Date 11/19/02
 REGISTERED AGENT MUST SIGN

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
PRES.	LINDSEY NOBLE MGR	19823 GULF BLVD *38	INDIAN SHORES, FL 33785
REINSTATEMENT 2002			
<i>12/2 cust</i>			

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of Managing Member/Manager *Lindsey Noble* Date 11/19/02 Daytime Phone # 727-517-3875
 Typed or printed name of signing Managing Member/Manager LINDSEY NOBLE

CR2ED01 (8/01)