

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L01000016472

**FILED**  
**Jan 06, 2010**  
**Secretary of State**

**Entity Name:** COLLABORATIVE MARKETING CONSORTIUM LLC

**Current Principal Place of Business:**

3948 EMERALD ESTATES CIRCLE  
APOPKA, FL 32703 US

**New Principal Place of Business:**

13513 RIGGS WAY  
WINDERMERE, FL 34786 US

**Current Mailing Address:**

3948 EMERALD ESTATES CIRCLE  
APOPKA, FL 32703 US

**New Mailing Address:**

13513 RIGGS WAY  
WINDERMERE, FL 34786 US

**FEI Number:** 37-1429705

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

KNOWLES, PAM A MRS.  
3948 EMERALD ESTATES CIRCLE  
APOPKA, FL 32703 US

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

KNOWLES, PAM A MRS.  
13513 RIGGS WAY  
WINDERMERE, FL 34786 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: MRS. PAM A. KNOWLES

01/06/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: KNOWLES, PATRICK M MR.  
Address: 13513 RIGGS WAY  
City-St-Zip: WINDERMERE, FL 34786 US

Title: MGRM  
Name: KNOWLES, PAM A MRS.  
Address: 13513 RIGGS WAY  
City-St-Zip: WINDERMERE, FL 34786 US

I hereby 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MRS. PAM A. KNOWLES

MGRM

01/06/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date