

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L02000010949

FILED
Mar 07, 2005
Secretary of State

Entity Name: FINANCIAL COUNSELING SERVICES, LLC

Current Principal Place of Business:

422 26TH ST W
SUITE 201
BRADENTON, FL 34205 US

New Principal Place of Business:

6804 WASHINGTON PLACE
BRADENTON, FL 34207 US

Current Mailing Address:

422 26TH ST W
SUITE 201
BRADENTON, FL 34205 US

New Mailing Address:

6804 WASHINGTON PLACE
BRADENTON, FL 34207 US

FEI Number: 81-0553537

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGENTS AND CORPORATIONS, INC.
773 4TH AVENUE NORTH STE. E
NAPLES, FL 34102 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: DAVID N WILLIAMS

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: ZALANKA, CRAIG
Address: 2231 LOCKWOOD MEADOWS ST
City-St-Zip: SARASOTA, FL 34234

Title: MGRM () Delete
Name: DUMAS, STEVE
Address: 5546 12TH STREET
City-St-Zip: ZEPHYRHILLS, FL 33540

Title: MGRM (X) Delete
Name: LARSON, SHARON
Address: 422 26TH ST W #201
City-St-Zip: BRADENTON, FL 34205

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LARSON, SHARON
Address: 6804 WASHINGTON PLACE
City-St-Zip: BRADENTON, FL 34207 US

Title: MGR (X) Change () Addition
Name: SEAMAN, KELLY K
Address: 2421 15TH ST WEST
City-St-Zip: PALMETTO, FL 34221 US

Title: () Change () Addition
Name:
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 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: SHARON LARSON

MGMR

03/07/2005

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