

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L02000012150

Entity Name: INTELLEDATA, LLC

FILED  
Nov 17, 2008  
Secretary of State

**Current Principal Place of Business:**

950 S. PINE ISLAND ROAD  
PLANTATION, FL 33324

**New Principal Place of Business:**

8015 NW 110 DRIVE  
PARKLAND, FL 33076

**Current Mailing Address:**

950 S. PINE ISLAND ROAD  
PLANTATION, FL 33324

**New Mailing Address:**

8015 NW 110 DRIVE  
PARKLAND, FL 33076

FEI Number: 72-1525095

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GONZALEZ, ANDRES COO  
8015 NW 110 AVE  
PARKLAND, FL 33076 US

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

GONZALEZ, ANDRES CEO  
8015 NW 110 AVE  
PARKLAND, FL 33076 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: ANDRES GONZALEZ

11/17/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: GONZALEZ, ANDRES  
Address: 8015 NW 110 AVE  
City-St-Zip: PARKLAND, FL 33076

Title: MGR (X) Delete  
Name: BUENDIA, GUSTAVO  
Address: 20185 E. COUNTRY CLUB DR #205  
City-St-Zip: MIAMI, FL 33180

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ANDRES GONZALEZ

CEO

11/17/2008

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