2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L02000013583

Entity Name: AEF CONSULTING, LLC

FILED Jul 12, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3300 UNIVERSITY DRIVE 1951 N.W. 19TH STREET

SUITE 101 SUITE 200 CORAL SPRINGS, FL 33065 BOCA RATON, FL 33431

Current Mailing Address: New Mailing Address:

3300 UNIVERSITY DRIVE 1951 N.W. 19TH STREET SUITE 101 SUITE 200

SUITE 101 SUITE 200 CORAL SPRINGS, FL 33065 BOCA RATON, FL 33431

FEI Number: 22-3871586 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GERSON, GARY N 1645 PALM BEACH LAKED BLVD., SUITE 1200 WEST PALM BEACH, FL 33401 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: GARY N. GERSON

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: EISNER, NEIL EISNER, NEIL

 Address:
 3300 UNIVERSITY DRIVE
 Address:
 1951 N.W. 19TH STREET, SUITE 200

 City-St-Zip:
 CORAL SPRINGS, FL 33065
 City-St-Zip:
 BOCA RATON, FL 33431

Title: MGR () Delete Title: MGR (X) Change () Addition Name: ANDREACCI, DANIEL Name: ANDREACCI, DANIEL

Name: ANDREACCI, DANIEL Name: ANDREACCI, DANIEL
Address: 3300 UNIVERSITY DRIVE Address: 1951 N.W. 19TH STREET, SUITE 200

Address: 3300 UNIVERSITY DRIVE Address: 1951 N.W. 19TH STREET, SUITE 200
City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: BOCA RATON, FL 33431

Title: MGR () Delete Title: MGR (X) Change () Addition Name: FALCONE, ARTHUR J Name: FALCONE, ARTHUR J

Address: 3300 UNIVERSITY DRIVE Address: 1951 N.W. 19TH STREET, SUITE 200

City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: BOCA RATON, FL 33431

I hereby certify that the information supplied with this filing does not qualify for the 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: ARTHUR J FALCONE MGR 07/12/2006