

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L02000015942

FILED
Mar 18, 2005
Secretary of State

Entity Name: TECH ZONE LLC

Current Principal Place of Business:

12947 WATERFORD WOOD CIRCLE
APT 304
ORLANDO, FL 32828

New Principal Place of Business:

1208 MARTIN BLVD
ORLANDO, FL 32825

Current Mailing Address:

12947 WATERFORD WOOD CIRCLE
APT 304
ORLANDO, FL 32828

New Mailing Address:

6445 S. CHICKASAW TRAIL
STE 273
ORLANDO, FL 32829

FEI Number: 30-0089094 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CHRISTIAN, JAMAR R
12947 WATERFORD WOOD CIRCLE
APT 304
ORLANDO, FL 32828 US

Name and Address of New Registered Agent:

CHRISTIAN, JAMAR R
6445 S. CHICKASAW TRAIL
STE 273
ORLANDO, FL 32829 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: JAMAR CHRISTIAN

03/18/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: CHRISTIAN, JAMAR R OWNER
Address: 12947 WATERFORD WOOD CIRCLE APT 304
City-St-Zip: ORLANDO, FL 32828 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CHRISTIAN, JAMAR R OWNER
Address: 6445 S. CHICKASAW TRAIL STE 273
City-St-Zip: ORLANDO, FL 32829 US

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: JAMAR CHRISTIAN

CEO

03/18/2005

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