## 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L03000003213

Entity Name: VTSERVICES, LLC

City-St-Zip:

FILED Apr 20, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 797 SILVERSMITH CIRCLE 1169 ORANGE GROVE LN LAKE MARY, FL 32746 APOPKA, FL 32712 **Current Mailing Address: New Mailing Address:** 797 SILVERSMITH CIRCLE 1169 ORANGE GROVE LN LAKE MARY, FL 32746 APOPKA, FL 32712 FFI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired (X) 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: Name and Address of New Registered Agent: PREECE, ANDREW D SYLVESTER, ALAN M 285 TORPOINT GATE 5632 BAÝSIDE DRIVE ORLANDO, FL 32819 US LONGWOOD, FL 32779 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: ALAN SYLVESTER 04/20/2005 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES: () Delete Title: MGRM ( ) Change (X) Addition PREECE, ANDREW D Name: Name: Address: Address: 1169 ORANGE GROVE LN. City-St-Zip: City-St-Zip: APOPKA, FL 32712 US Title: Title: MGRM ( ) Change (X) Addition ( ) Delete SYLVESTER, ALAN M Name: Name: Address: Address: 285 TORPOINT GATE City-St-Zip: City-St-Zip: LONGWOOD, FL 32779 Title: () Delete Title: MGRM ( ) Change (X) Addition HUMPHREY, PHILIP T Name: Name: 478 NORTH PIN OAK PLACE # 206 Address: Address:

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.

City-St-Zip:

LONGWOOD, FL 32779

SIGNATURE: ANDREW PREECE MGRM 04/20/2005