

# **2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L03000014504

Entity Name: CYRIX SYSTEMS, L.L.C.

**FILED**  
**Jan 16, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

255 NE 2ND AVE # 240  
DELRAY BEACH, FL 33444

**New Principal Place of Business:**

**Current Mailing Address:**

255 NE 2ND AVE # 240  
CORAL SPRINGS, FL 33444

**New Mailing Address:**

255 NE 2ND AVE # 240  
DELRAY BEACH, FL 33444

FEI Number: 65-1197456      FEI Number Applied For ( )      FEI Number Not Applicable ( )      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:**

CORPDIRECT AGENTS, INC.  
103 N. MERIDIAN STREET, LOWER LEVEL  
TALLAHASSEE, FL 32301      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: MARK D. BODLEY

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: CYRIX SYSTEMS LLC,  
Address: 255 NE 2ND AVE # 240  
City-St-Zip: DELRAY BEACH, FL 33444 US

**ADDITIONS/CHANGES:**

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 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: MARK D. BODLEY

MR

01/16/2007

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