

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000031632

Entity Name: TCS OBSOLETE, LLC

FILED  
Nov 30, 2009  
Secretary of State

**Current Principal Place of Business:**

976 FLORIDA CENTRAL, SUITE 136  
LONGWOOD, FL 32750

**New Principal Place of Business:**

975 FLORIDA CENTRAL  
LONGWOOD, FL 32750

**Current Mailing Address:**

PO BOX 521787  
LONGWOOD, FL 32752

**New Mailing Address:**

FEI Number: 56-2424566      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:**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: MICHELE HENRY

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGR ( ) Delete  
Name: POSEA, DAVID G  
Address: 976 FLORIDA CENTRAL, SUITE 136  
City-St-Zip: LONGWOOD, FL 32750

Title: MGR (X) Change ( ) Addition  
Name: POSEA, DAVID G  
Address: PO BOX 521787  
City-St-Zip: LONGWOOD, FL 32752

Title: MGR ( ) Delete  
Name: JOHNSON, CHRISTOPHER W JR.  
Address: 976 FLORIDA CENTRAL, SUITE 136  
City-St-Zip: LONGWOOD, FL 32750

Title: MGR (X) Change ( ) Addition  
Name: JOHNSON, CHRISTOPHER W JR.  
Address: PO BOX 521787  
City-St-Zip: LONGWOOD, FL 32752

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: CHRISTOPHER JOHNSON

MGR

11/30/2009

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