

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 11, 2005
Secretary of State

DOCUMENT# L03000042712

Entity Name: THE COMPLIANCE AND AUDIT GROUP, LLC

Current Principal Place of Business:

7680 UNIVERSAL BLVD.
#580
ORLANDO, FL 32835 US

New Principal Place of Business:

Current Mailing Address:

7680 UNIVERSAL BLVD.
#580
ORLANDO, FL 32835 US

New Mailing Address:

FEI Number: 90-0132948 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LEGALZOOM NEVADA INC
44 W. FLAGLER ST.
SUITE 675
MIAMI, FL 33130 US

Name and Address of New Registered Agent:

STUDLEY, SUZANNE H
3611 PERSHING AVENUE
ORLANDO, FL 32812 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: SUZANNE H STUDLEY 10/11/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: STUDLEY, SUZANNE H
Address: 3120 DOWNS COVE ROAD
City-St-Zip: WINDERMERE, FL 34786 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: STUDLEY, SUZANNE H
Address: 3611 PERSHING AVENUE
City-St-Zip: ORLANDO, FL 32812 US

Title: MGRM () Delete
Name: COLEY, E.G.
Address: 518 TRAM ROAD
City-St-Zip: COLUMBIA, SC 29210 US

Title: MGRM (X) Change () Addition
Name: COLEY, E.G.
Address: 1139 VIZCAYA LAKES ROAD, #107
City-St-Zip: OCOEE, FL 34761 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: EG COLEY MGRM 10/11/2005

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