

# 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000026081

Entity Name: JOBWIRE.COM LLC

FILED  
Oct 27, 2005  
Secretary of State

**Current Principal Place of Business:**

P.O. BOX 1411  
PONTE VEDRA BEACH, FL 32004 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1411  
PONTE VEDRA BEACH, FL 32004 US

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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:**

GUSTAFSON, STEVEN P  
449 SOUTH MILL VIEW WAY  
PONTE VEDRA BEACH, FL 32082 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: STEVEN GUSTAFSON

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: GUSTAFSON, STEVEN P  
Address: P.O. BOX 1411  
City-St-Zip: PONTE VEDRA BEACH, FL 32004 US

Title: MGRM ( ) Delete  
Name: WANG, VICTOR  
Address: P.O. BOX 1411  
City-St-Zip: PONTE VEDRA BEACH, FL 32004 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: STEVEN GUSTAFSON

MGRM

10/27/2005

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