

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000029375

FILED
Jun 14, 2006
Secretary of State

Entity Name: AMALGAMATED BUSINESS PRINCIPLES, LLC

Current Principal Place of Business:

318 INDIAN TRACE #231
WESTON, FL 33326

New Principal Place of Business:

318 INDIAN TRACE
237
WESTON, FL 33326

Current Mailing Address:

318 INDIAN TRACE #231
WESTON, FL 33326

New Mailing Address:

318 INDIAN TRACE
#237
WESTON, FL 33326

FEI Number: 34-1989151 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:

JOHN-PIERRE, ROBERT
318 INDIAN TRACE #231
WESTON, FL 33326 US

Name and Address of New Registered Agent:

JOHN-PIERRE, ROBERT
318 INDIAN TRACE
#237
WESTON, FL 33326 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: X

06/14/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: JOHN-PIERRE, ROBERT
Address: PO BOX 670246
City-St-Zip: CORAL SPRINGS, FL 33063

Title: MGRM () Delete
Name: ECHOLS, PAUL
Address: 318 INDIAN TRACE #231
City-St-Zip: WESTON, FL 33326

Title: MGRM () Delete
Name: FORBES, DAMEN
Address: 318 INDIAN TRACE #231
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: ECHOLS, PAUL
Address: 318 INDIAN TRACE #237
City-St-Zip: WESTON, FL 33326

Title: MGRM (X) Change () Addition
Name: FORBES, DAMEN
Address: 318 INDIAN TRACE #237
City-St-Zip: WESTON, FL 33326

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: X

MGRM

06/14/2006

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