2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Aug 10, 2009
Secretary of State

DOCUMENT# L04000029375

Entity Name: AMALGAMATED BUSINESS PRINCIPLES, LLC

Current Principal Place of Business:

318 INDIAN TRACE
237
WESTON, FL 33326

New Principal Place of Business:

Current Mailing Address:

318 INDIAN TRACE
#237
WESTON, FL 33326

New Mailing Address:

FEI Number: 34-1989151 **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:

LEA, BRIAN C
318 INDIAN TRACE
#237
WESTON, FL 33326 US

Name and Address of New Registered Agent:

JOHN-PIERRE, ROBERT S
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: ROBERT S JOHN-PIERRE 08/10/2009
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 #237	
City-St-Zip:	WESTON, FL 33326	
Title:	MGRM	( ) Delete
Name:	FORBES, DAMEN	
Address:	318 INDIAN TRACE #237	
City-St-Zip:	WESTON, FL 33326	
Title:	MGRM	( ) Delete
Name:	LEA, BRIAN C	
Address:	318 INDIAN TRACE #237	
City-St-Zip:	WESTON, FL 33326	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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: ROBERT S JOHN-PIERRE MGM 08/10/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date