

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000044415

**Entity Name:** INFORMATION CONCEPTS, LLC

**FILED**  
**Jan 19, 2014**  
**Secretary of State**

**Current Principal Place of Business:**

6601 MEMORIAL HWY  
SUITE 221  
TAMPA, FL 33615

**New Principal Place of Business:**

**Current Mailing Address:**

12157 WEST LINEBAUGH AVE., UNIT #359  
TAMPA, FL 33626

**New Mailing Address:**

**FEI Number:** 20-1242768

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

THE UPS STORE #1977  
12157 WEST LINEBAUGH AVE.  
TAMPA, FL 33626 US

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

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:** THE UPS STORE #1977

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**AUTHORIZED PERSONS:**

**Title:** MGR  
**Name:** ADAMS, GERALD A SR.  
**Address:** 12157 WEST LINEBAUGH AVE.  
**City-St-Zip:** TAMPA, FL 33626

**Title:** SC  
**Name:** ADAMS, GERALD A SR.  
**Address:** 12157 WEST LINEBAUGH AVE., UNIT #359  
**City-St-Zip:** TAMPA, FL 33626

I hereby 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 authorized to execute this report as required by Chapter 605, Florida Statutes.

**SIGNATURE:** GERALD A ADAMS SR.

MGR

01/19/2014

\_\_\_\_\_  
Electronic Signature of Authorized Person

\_\_\_\_\_  
Date