

# **2006 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000058602

**FILED**  
**Feb 17, 2006**  
**Secretary of State**

**Entity Name:** ADVANCED COMMUNICATION CONNECTION, LLC

**Current Principal Place of Business:**

5734 LAGUSTRUM LANE  
POLK CITY, FL 33868

**New Principal Place of Business:**

533 BERKLEY RD.  
AUBURNDALE, FL 33823

**Current Mailing Address:**

5734 LAGUSTRUM LANE  
POLK CITY, FL 33868

**New Mailing Address:**

533 BERKLEY RD.  
AUBURNDALE, FL 33823

**FEI Number:** 04-3799870      **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:**

HURST, DAVID G  
5734 LAGUSTRUM LN  
POLK CITY, FL 33868      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:** DAVID G. HURST

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR      ( ) Delete  
**Name:** HURST, DAVID G  
**Address:** 5734 LAGUSTRUM LN  
**City-St-Zip:** POLK CITY, FL 33868

**ADDITIONS/CHANGES:**

**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 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:** DAVID G. HURST

MANA

02/17/2006

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