

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000059901

**FILED**  
**Oct 07, 2011**  
**Secretary of State**

**Entity Name:** SECURE IT SOLUTIONS, LLC

**Current Principal Place of Business:**

2751 SW 71ST TERRACE  
803  
DAVIE, FL 33314

**New Principal Place of Business:**

**Current Mailing Address:**

2751 SW 71ST TERRACE  
803  
DAVIE, FL 33314

**New Mailing Address:**

**FEI Number:** 30-0267804

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LAJEUNESSE, WILLIAM J  
2751 SW 71ST TERRACE  
803  
DAVIE, FL 33314 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: WILLIAM LAJEUNESSE

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: LAJEUNESSE, WILLIAM J  
Address: 2751 SW 71ST TERRACE APT 803  
City-St-Zip: DAVIE, FL 33314

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 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: WILLIAM LAJEUNESSE

MGR

10/07/2011

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