

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000076327

Entity Name: PILLAR CONCEPTS, LLC

FILED
Sep 30, 2009
Secretary of State

Current Principal Place of Business:

450 STATE ROAD 13 NORTH
SUITE 106-131
JACKSONVILLE, FL 32259

New Principal Place of Business:

Current Mailing Address:

450 STATE ROAD 13 NORTH
SUITE 106-131
JACKSONVILLE, FL 32259

New Mailing Address:

FEI Number: 34-2020921 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:

Name and Address of New Registered Agent:

SCHUSTER, JAMI L
450 STATE ROAD 13 NORTH
SUITE 106-131
JACKSONVILLE, FL 32259 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: JAMI L SCHUSTER

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SCHUSTER, JAMI L PRES
Address: 450 STATE ROAD 13 N, SUITE 106-131
City-St-Zip: JACKSONVILLE, FL 32259

Title: MGM () Delete
Name: WIGGINS, TREVOR H ADVISOR
Address: 450 STATE ROAD 13 N, SUITE 106-131
City-St-Zip: JACKSONVILLE, FL 32259

ADDITIONS/CHANGES:

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: JAMI L SCHUSTER

MGMR

09/30/2009

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