

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000004717

FILED  
Apr 06, 2007  
Secretary of State

Entity Name: HYDIS LLC

## Current Principal Place of Business:

7632 SOUTHSIDE BLVD  
422  
JACKSONVILLE, FL 32256

## New Principal Place of Business:

7491 SCARLET IBIS LANE  
JACKSONVILLE, FL 32256 US

## Current Mailing Address:

7632 SOUTHSIDE BLVD  
422  
JACKSONVILLE, FL 32256

## New Mailing Address:

7491 SCARLET IBIS LANE  
JACKSONVILLE, FL 32256 US

FEI Number: 20-2162788      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:

DOMA, SANTOSH  
7632 SOUTHSIDE BLVD  
422  
JACKSONVILLE, FL 32256 US

## Name and Address of New Registered Agent:

DOMA, SANTOSH  
7491 SCARLET IBIS LANE  
JACKSONVILLE, FL 32256 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: SANTOSH DOMA

04/06/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: BONTA, DHEERAJ  
Address: 7632 SOUTHSIDE BLVD APT 422  
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: BONTA, DHEERAJ  
Address: 7491 SCARLET IBIS LANE  
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: MGRM ( ) Change (X) Addition  
Name: DOMA, SANTOSH  
Address: 7491 SCARLET IBIS LANE  
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: MGRM ( ) Change (X) Addition  
Name: BARLA, VINUTHAN  
Address: 7491 SCARLET IBIS LANE  
City-St-Zip: JACKSONVILLE, FL 32256 US

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: SANTOSH DOMA

MGRM

04/06/2007

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