

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000033967

**FILED**  
**Feb 23, 2012**  
**Secretary of State**

**Entity Name:** LEGACY GROUP CONSULTING, L.L.C.

**Current Principal Place of Business:**

3345 EUNICE RD  
JACKSONVILLE, FL 32250

**New Principal Place of Business:**

**Current Mailing Address:**

3345 EUNICE RD  
JACKSONVILLE, FL 32250

**New Mailing Address:**

**FEI Number:** 20-2657551

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BARTLETT, PAMELA D  
3345 EUNICE RD  
JACKSONVILLE, FL 32250 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: PAMELA D BARTLETT

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BARTLETT, PAMELA D  
Address: 3345 EUNICE RD  
City-St-Zip: JACKSONVILLE, FL 32250

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: PAMELA D BARTLETT

MGRM

02/23/2012

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