

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000040546

FILED  
Nov 02, 2009  
Secretary of State

Entity Name: YRP GLOBAL SERVICES LLC

**Current Principal Place of Business:**

2132 WHISPER LAKES BLVD.  
ORLANDO, FL 32837

**New Principal Place of Business:**

**Current Mailing Address:**

2132 WHISPER LAKES BLVD.  
ORLANDO, FL 32837

**New Mailing Address:**

FEI Number: 20-2789205      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:**

RAMOS, YOLANDA  
2132 WHISPER LAKES BLVD.  
ORLANDO, FL 32837      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: YOLANDA RAMOS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: RAMOS, YOLANDA  
Address: 2132 WHISPER LAKES BLVD.  
City-St-Zip: ORLANDO, FL 32837

Title: MGR      ( ) Delete  
Name: SURIEL, GABRIELA  
Address: 2132 WHISPER LAKES BLVD.  
City-St-Zip: ORLANDO, FL 32837

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR      (X) Change ( ) Addition  
Name: PUMA, HUGO  
Address: 2132 WHISPER LAKES BLVD.  
City-St-Zip: ORLANDO, FL 32837

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: YOLANDA RAMOS

MNG

11/02/2009

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