

**2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000047335

**FILED  
Oct 03, 2011  
Secretary of State**

**Entity Name:** CYQUIP, LLC

**Current Principal Place of Business:**

409 NIGHTHAWK LANE  
ST. AGUSTINE, FL 32080

**New Principal Place of Business:**

**Current Mailing Address:**

409 NIGHTHAWK LANE  
ST. AGUSTINE, FL 32080

**New Mailing Address:**

**FEI Number:** 20-2826097      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

KHAN, NISHAD A  
425 WEST COLONIAL DRIVE STE 204  
ORLANDO, FL 32804 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: NISHAD A KHAN

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** NIGHTHAWK MANAGEMENT LLC  
**Address:** 409 NIGHTHAWK LANE  
**City-St-Zip:** ST. AGUSTINE, FL 32080

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: PAUL W HUND III MD

MGR

10/03/2011

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