

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000055203

FILED
Oct 19, 2006
Secretary of State

Entity Name: PROFESSIONAL INVENTORY CONTROL CONSULTANTS, L.L.C.

Current Principal Place of Business:

1010 E. SILVER SPRINGS BOULEVARD
SUITE I
OCALA, FL 34470

New Principal Place of Business:

5050 NE 35TH ST
SILVER SPRINGS, FL 34489

Current Mailing Address:

1010 E. SILVER SPRINGS BOULEVARD
SUITE I
OCALA, FL 34470

New Mailing Address:

P O BOX 2691
OCALA, FL 34478

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

RHODES, MARIBETH
1010 E. SILVER SPRINGS BOULEVARD
SUITE I
OCALA, FLORIDA, FL 34470 US

Name and Address of New Registered Agent:

RHODES, MARIBETH
5050 NE 35TH ST
SILVER SPRINGS, FL 34489 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: MARIBETH RHODES

10/19/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

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

ADDITIONS/CHANGES:

Title: MS () Change (X) Addition
Name: RHODES, MARIBETH OWNER
Address: P O BOX 2691
City-St-Zip: Ocala, FL 34478

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: MARIBETH RHODES

RA

10/19/2006

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