

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000065879

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Entity Name:** HSA GOVERNMENT SERVICES, L.L.C.

**Current Principal Place of Business:**

2101 S. WAVERLY PLACE, STE. 100  
MELBOURNE, FL 32901

**New Principal Place of Business:**

**Current Mailing Address:**

2101 S. WAVERLY PLACE, STE. 100  
MELBOURNE, FL 32901

**New Mailing Address:**

2426 CRYSTAL OAKS LANE  
MELBOURNE, FL 32904

**FEI Number:** 20-3102021

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SUMAN, CRAIG A  
2101 S. WAVERLY PLACE, STE. 100  
MELBOURNE, FL 32901 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: CRAIG A. SUMAN

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SUMAN, CRAIG A  
Address: 2101 S. WAVERLY PLACE SUITE 100  
City-St-Zip: MELBOURNE, FL 32901

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: CRAIG A. SUMAN

MGRM

01/04/2012

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