

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000069357

**FILED**  
**Apr 14, 2011**  
**Secretary of State**

**Entity Name:** MARK J. MCAVOY PSL, LLC

**Current Principal Place of Business:**

1 SEACREST DRIVE  
LLOYD NECK, NY 11743

**New Principal Place of Business:**

**Current Mailing Address:**

C/O THOMAS L.COSTA, LLP  
3535 ROUTE 112, SUITE  
MEDFORD, NY 11763 US

**New Mailing Address:**

**FEI Number:** 20-3181815

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COSTA, THOMAS L  
8517 EGRET MEADOW LANE  
WEST PALM BEACH, FL 33412 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: MARK J MCAVOY

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: MCAVOY, MARK J  
Address: 1 SEACREST DRIVE  
City-St-Zip: LLOYD NECK, NY 11743

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: MARK J MCAVOY

MGR

04/14/2011

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