

# **2008 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000070431

**FILED**  
**Apr 18, 2008**  
**Secretary of State**

**Entity Name:** MP SERVICES LLC

**Current Principal Place of Business:**

2545 SHEFFIELD DR.  
DELTONA, FL 32738 US

**New Principal Place of Business:**

1153 SW 138TH PLACE  
MIAMI, FL 33184 US

**Current Mailing Address:**

2545 SHEFFIELD DR.  
DELTONA, FL 32738 US

**New Mailing Address:**

1153 SW 138TH PLACE  
MIAMI, FL 33184 US

**FEI Number:** 76-0796617      **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:**

WEBSTER, PHILIP S JR.  
2545 SHEFFIELD DR.  
DELTONA, FL 32738 US

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

MATTA, GLADYS PRES  
1153 SW 138TH PLACE  
MIAMI, FL 33184 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: MATTA, GLADYS

04/18/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: WEBSTER, PHILIP S JR  
Address: 2545 SHEFFIELD DR.  
City-St-Zip: DELTONA, FL 32738 US

**ADDITIONS/CHANGES:**

Title: PRES      (X) Change ( ) Addition  
Name: MATTA, GLADYS PRES  
Address: 1153 SW 138TH PLACE  
City-St-Zip: MIAMI, FL 33184 US

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: MATTA, GLADYS

PRES

04/18/2008

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