

**2006 LIMITED LIABILITY COMPANY REINSTATEMENT**

**FILED  
Oct 02, 2006  
Secretary of State**

DOCUMENT# L05000085714

Entity Name: NT SOLUTIONS LLC

**Current Principal Place of Business:**

4402 LAKE TAHOE CIR  
WEST PALM BEACH, FL 33409

**New Principal Place of Business:**

**Current Mailing Address:**

4402 LAKE TAHOE CIR  
WEST PALM BEACH, FL 33409

**New Mailing Address:**

FEI Number: 20-2819565      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

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

LYNCH, COLLIN  
4402 LAKE TAHOE CIR  
WEST PALM BEACH, FL 33409      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: COLLIN LYNCH

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

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: LYNCH, COLLIN  
Address: 4402 LAKE TAHOE CIR  
City-St-Zip: WEST PALM BEACH, FL 33409

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: COLLIN LYNCH

MGR

10/02/2006

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