

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000014873

**FILED**  
**Jan 21, 2009**  
**Secretary of State**

**Entity Name:** STRATEGIC EMPLOYER SOLUTIONS, LLC

**Current Principal Place of Business:**

809 E. BLOOMINGDALE AVE, 409  
BRANDON, FL 33511

**New Principal Place of Business:**

**Current Mailing Address:**

809 E. BLOOMINGDALE AVE, 409  
BRANDON, FL 33511

**New Mailing Address:**

**FEI Number:** 20-4321578      **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:**

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

JEFFREY A. DOWD, P.A.  
609 WEST LUMSDEN RD.  
BRANDON, FL 33511 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:** JEFFREY A. DOWD

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM ( ) Delete  
**Name:** CONA, RICHARD  
**Address:** 1218 RAINBROOK CIRCLE  
**City-St-Zip:** VALRICO, FL 33594

**Title:** MGRM ( ) Delete  
**Name:** CONA, GARY  
**Address:** 1218 RAINBROOK CIRCLE  
**City-St-Zip:** VALRICO, FL 33594

**ADDITIONS/CHANGES:**

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

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

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:** GARY CONA

MGRM

01/21/2009

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