

2011 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000057455

FILED
Jan 03, 2011
Secretary of State

Entity Name: RESILIRE CONSULTING, LLC

Current Principal Place of Business:

8875 HIDDEN RIVER PARKWAY
SUITE 300
TAMPA, FL 33637 US

New Principal Place of Business:

Current Mailing Address:

201 ST. CHARLES AVENUE
SUITE 114-382
NEW ORLEANS, LA 70170 US

New Mailing Address:

FEI Number: 20-5095487

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD
SUITE A-100
TAMPA, FL 336123425 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: JACOB VARGHESE

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: COMPREHENSIVE EMERGENCY MANAGEMENT
Address: 664 WOODROW AVENUE
City-St-Zip: BEAUMONT, TX 77705 US

Title: MGRM
Name: VIRTUS ENTERPRISES LLC
Address: 140 GLENHILL DRIVE
City-St-Zip: HOUMA, LA 70363

Title: MGRM
Name: RESILIRE GROUP LLC
Address: 1404 WHEELIS ROAD
City-St-Zip: WYLIE, TX 75098

Title: MGRM
Name: ALAN WARDLAW ENTERPRISES LLC
Address: 926 SOUTH 27TH STREET
City-St-Zip: ARKADDELPHIA, AR 71923

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: JOSHUA NORMAN

PRES

01/03/2011

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