

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000009023

Entity Name: IP RESOURCES, LLC

FILED  
Jun 10, 2009  
Secretary of State

## Current Principal Place of Business:

19046 BRUCE B. DOWNS BLVD #87  
TAMPA, FL 33647

## New Principal Place of Business:

16017 NORTH FLORIDA AVE  
SUITE 117  
LUTZ, FL 33549 US

## Current Mailing Address:

PO BOX 49072  
TAMPA, FL 33647

## New Mailing Address:

16017 NORTH FLORIDA AVE  
SUITE 117  
LUTZ, FL 33549 US

FEI Number: 20-8486429

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SMITH, CHERYL L  
220 SOUTH FRANKLIN STREET  
TAMPA, FL 33602 US

## Name and Address of New Registered Agent:

ABRAHAM, STEVEN J  
16017 NORTH FLORIDA AVE  
SUITE 117  
LUTZ, FL 33549 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: STEVEN J ABRAHAM

06/10/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGR ( ) Change (X) Addition  
Name: ABRAHAM, STEVEN J  
Address: 16017 NORTH FLORIDA AVE, SUITE 117  
City-St-Zip: LUTZ, FL 33549 US

Title: MGR ( ) Change (X) Addition  
Name: ABRAHAM, ANDRIANA  
Address: 16017 NORTH FLORIDA AVE, SUITE 117  
City-St-Zip: LUTZ, FL 33549 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: STEVEN J ABRAHAM

MGR

06/10/2009

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