2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Mar 16, 2009
Secretary of State

DOCUMENT# L07000018873

Entity Name: ZUSA SUPPORT SERVICES LLC

Current Principal Place of Business:

132 10TH AVE. N., #101
SAFETY HARBOR, FL 34695 US

New Principal Place of Business:

Current Mailing Address:

132 10TH AVE. N., #101
SAFETY HARBOR, FL 34695 US

New Mailing Address:

FEI Number: 20-8474496 **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:

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: DEL LEWIS

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: LEWIS, DELMAR
Address: 132 10TH AVE. N., #101
City-St-Zip: SAFETY HARBOR, FL 34695 US

Title: MGRM ( ) Delete
Name: LEWIS, JOSHUA
Address: 132 10TH AVE. N., #101
City-St-Zip: SAFETY HARBOR, FL 34695 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: LEWIS, DELMAR
Address: 3087-1805 LANDMARK BLVD
City-St-Zip: PALM HARBOR, FL, FL 34684 US

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: DEL LEWIS PRES 03/16/2009

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