

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000026575

Entity Name: AXSON SERVICES, LLC

FILED
Nov 18, 2008
Secretary of State

Current Principal Place of Business:

585 SPRING LEAP CIRCLE
SUITE A
WINTER GARDEN, FL 34787 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 784652
WINTER GARDEN, FL 347784652 US

New Mailing Address:

585 SPRING LEAP CIRCLE
SUITE A
WINTER GARDEN, FL 34787 US

FEI Number: FEI Number Applied For (X) 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:

AXSON, YOLANDA V
585 SPRING LEAP CIRCLE
WINTER GARDEN, FL 34787 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: YOLANDA AXSON

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: AXSON, YOLANDA V
Address: 585 SPRING LEAP CIRCLE
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: MGR () Delete
Name: AXSON, LESTER S SR
Address: 585 SPRING LEAP CIRCLE
City-St-Zip: WINTER GARDEN, FL 34787 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: AXSON, YOLANDA V MGR
Address: 585 SPRING LEAP CIRCLE
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: MGR (X) Change () Addition
Name: AXSON, LESTER S MGR
Address: 585 SPRING LEAP CIRCLE
City-St-Zip: WINTER GARDEN, FL 34787 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: LESTER AXSON

MGR

11/18/2008

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