

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000092675

Entity Name: TECH SQUAD LLC

FILED  
Oct 16, 2009  
Secretary of State

**Current Principal Place of Business:**

1868 NW 9TH STREET  
BOCA RATON, FL 33486 US

**New Principal Place of Business:**

**Current Mailing Address:**

1868 NW 9TH STREET  
BOCA RATON, FL 33486 US

**New Mailing Address:**

FEI Number: 71-1038846      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:**

SMILIANSKY, FREDERICO  
1868 NW 9TH STREET  
BOCA RATON, FL 33486 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: FREDERICO SMILIANSKY

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SMILIANSKY, FREDERICO  
Address: 1868 NW 9TH STREET  
City-St-Zip: BOCA RATON, FL 33486 US

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: CARVALHO, JOAO  
Address: 901 BRICKELL KEY BLVD. #2308  
City-St-Zip: MIAMI, FL 33131 US

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: FREDERICO SMILIANSKY

MGR

10/16/2009

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