

# **2008 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000096447

**FILED**  
**Oct 26, 2008**  
**Secretary of State**

**Entity Name:** BUSINESS SOLUTION INTEGRATORS, LLC

**Current Principal Place of Business:**

2446 LIELASUS DRIVE  
ORLANDO, FL 32835 US

**New Principal Place of Business:**

**Current Mailing Address:**

2446 LIELASUS DRIVE  
ORLANDO, FL 32835 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:**

COPPER, WILLIAM  
2446 LIELASUS DRIVE  
ORLANDO, FL 32835 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: WILLIAM COPPER

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: COPPER, WILLIAM  
Address: 2446 LIELASUS DRIVE  
City-St-Zip: ORLANDO, FL 32835 US

**ADDITIONS/CHANGES:**

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: JEFF COPPER

MGR

10/26/2008

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