

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000109312

FILED
Nov 09, 2008
Secretary of State

Entity Name: SMART COMMUNICATION SYSTEMS, LLC.

Current Principal Place of Business:

12202 N 22ND STREET
SUITE#931
TAMPA, FL 33612 US

New Principal Place of Business:

1107 EMERALD HILL WAY
VALRICO, FL 33594 US

Current Mailing Address:

12202 N 22ND STREET
SUITE#931
TAMPA, FL 33612 US

New Mailing Address:

1107 EMERALD HILL WAY
VALRICO, FL 33594 US

FEI Number: 26-1332236 **FEI Number Applied For ()** **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:

POP-BUIA, PAVEL
12202 N 22ND STREET
SUITE#931
TAMPA, FL 33612 US

Name and Address of New Registered Agent:

POP-BUIA, PAVEL
1107 EMERALD HILL WAY
VALRICO, FL 33594 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: PAVEL POP-BUIA

11/09/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: POP-BUIA, PAVEL
Address: 12202 N 22ND STREET SUITE#931
City-St-Zip: TAMPA, FL 33612 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: POP-BUIA, PAVEL
Address: 1107 EMERALD HILL WAY
City-St-Zip: VALRICO, FL 33594 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: PAVEL POP-BUIA

PRES

11/09/2008

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