

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000115459

FILED
Jun 01, 2009
Secretary of State

Entity Name: IDEA GROUP INVESTMENT L.L.C.

Current Principal Place of Business:

920 W 10TH AVENUE
PALMETTO, FL 34221

New Principal Place of Business:

1488 E. SEMORAN BLVD
APOPKA, FL 32703

Current Mailing Address:

8607 COMPASS CT.
LAUREL, MD 20708

New Mailing Address:

1488 E. SEMORAN BLVD
APOPKA, FL 32703

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:

THOMAS, JOSE
9710 STIRLING ROAD
101
COOPER CITY, FL 33024 US

Name and Address of New Registered Agent:

THOMAS, VARGHESE M
1488 E. SEMORAN BLVD
APOPKA, FL 32703 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: VARGHESE THOMAS

06/01/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: THOMAS, MATHEW M
Address: 8607 COMPASS CT.
City-St-Zip: LAUREL, MD 20708

Title: MGR () Delete
Name: THOMAS, VARGHESE M
Address: 8607 COMPASS CT.
City-St-Zip: LAUREL, MD 20708

Title: MGR () Delete
Name: THOMAS, JOSEPH M
Address: 8607 COMPASS CT.
City-St-Zip: LAUREL, MD 20708

Title: MGR () Delete
Name: CHERIYATHU, SURESH BABU
Address: 3615 BURGERS ESTATE DRIVE
City-St-Zip: ELICOTT CITY, MD 21042

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: THOMAS, VARGHESE M
Address: 8607 COMPASS CT.
City-St-Zip: LAUREL, MD 20708

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: VARGHESE M THOMAS

MGRM

06/01/2009

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