2008 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 21, 2008
Secretary of State

DOCUMENT# L07000124026

Entity Name: AMSIC, LLC

Current Principal Place of Business:

311 8TH ST E.
BRADENTON, FL 34208 US

New Principal Place of Business:

Current Mailing Address:

6340 ROBIN COVE
BRADENTON, FL 34202 US

New Mailing Address:

FEI Number: 77-0708742 **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:

DR. KESERU, SANDOR I
311 8TH ST E.
BRADENTON, FL 34208 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: SANDOR I KESERU DR.
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: DR. KESERU, SANDOR I
Address: 311 8TH ST E.
City-St-Zip: BRADENTON, FL 34208 US

Title: MGRM ( ) Delete
Name: KENYERES, TAMAS
Address: 311 8TH ST E.
City-St-Zip: BRADENTON, FL 34208 US

Title: MGRM ( ) Delete
Name: OBORNI, ANNA
Address: 311 8TH ST E.
City-St-Zip: BRADENTON, FL 34208 US

ADDITIONS/CHANGES:

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

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: SANDOR I KESERU DR. MGR 10/21/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date