

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000014830

**Entity Name:** LEGAL ONESOURCE, LLC

**FILED**  
**Apr 03, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1616 JORK ROAD  
SUITE 203  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

**Current Mailing Address:**

1616 JORK ROAD  
SUITE 203  
JACKSONVILLE, FL 32207

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NOLAN, STEFANI K  
1616 JORK ROAD  
SUITE 203  
JACKSONVILLE, FL 32207 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: STEFANI K. NOLAN

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: NOLAN, STEFANI K  
Address: 1616 JORK ROAD, SUITE 203  
City-St-Zip: JACKSONVILLE, FL 32207

Title: MGR  
Name: WINDT, GENA N  
Address: 1616 JORK ROAD, SUITE 203  
City-St-Zip: JACKSONVILLE, FL 32207

I hereby 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: STEFANI NOLAN

MGR

04/03/2011

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