

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000018913

FILED
Nov 24, 2009
Secretary of State

Entity Name: CONSTRUCTION MANAGEMENT SERVICES, LLC

Current Principal Place of Business:

9140 GOLFSIDE DR. STE 10
JACKSONVILLE, FL 32256

New Principal Place of Business:

3653 REGENT BLVD
306
JACKSONVILLE, FL 32224

Current Mailing Address:

9140 GOLFSIDE DR. STE 10
JACKSONVILLE, FL 32256

New Mailing Address:

3653 REGENT BLVD
306
JACKSONVILLE, FL 32224

FEI Number: 26-2018236 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:

ADAMS & MARESMA, LLC
324 6TH AVE N
JACKSONVILLE BEACH, FL 32250 US

Name and Address of New Registered Agent:

CORNERSTONE ACCOUNTING
3430-1 KORI RD
JACKSONVILLE, FL 32257 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: JIM FISCHER

11/24/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: AMMONS, JODY M
Address: 9140 GOLFSIDE DR #9 S
City-St-Zip: JACKSONVILLE, FL 32256

Title: MGR () Delete
Name: BAGDON, JEFFREY
Address: 209 STORCAR CT.
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: MGR () Delete
Name: FRASE, PAUL
Address: 124 CROSSROAD LAKES DR.
City-St-Zip: PONTE VEDRA BEACH, FL 32082

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: AMMONS, JODY M
Address: 3653 REGENTS BLVD
City-St-Zip: JACKSONVILLE, FL 32224

Title: V.P. (X) Change () Addition
Name: JOHNS, WENDY K
Address: 3653 REGENT BLVD
City-St-Zip: JACKSONVILLE, FL 32224

Title: TRES (X) Change () Addition
Name: BEATTY, JAMES N
Address: 3653 REGENT BLVD
City-St-Zip: JACKSONVILLE, FL 32224

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: JODY M. AMMONS

PRES

11/24/2009

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