2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 13, 2009
Secretary of State

DOCUMENT# L08000019714

Entity Name: TRILOGY SYSTEMS LLC

Current Principal Place of Business:

1450 SOUTH WOODLAND BLVD
SUITE 300D
DELAND, 32720

New Principal Place of Business:

125 W. PLYMOUTH AVE
SUITE B
DELAND, FL 32720

Current Mailing Address:

1450 SOUTH WOODLAND BLVD
SUITE 300D
DELAND, 32720

New Mailing Address:

125 W. PLYMOUTH AVE
SUITE B
DELAND, FL 32720

FEI Number: 26-2036991 **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:

WILLIAMS, CHAUNCEY SR
950 GROVE HAMLET WAY
APT D
DELAND, FL 32720 US

Name and Address of New Registered Agent:

CHAUNCEY, WILLIAMS SR
1004 NORTH WOODLAND
1-3
DELAND, FL 32720 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: CHAUNCEY WILLIAMS 10/13/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: VP ( ) Change (X) Addition
Name: TOM PARSON
Address: 245 S. WOODLAND BLVD
City-St-Zip: DELAND, FL 32720

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: CHAUNCEY WILLIAMS CEO 10/13/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date