

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000028859

**FILED**  
**Apr 08, 2011**  
**Secretary of State**

**Entity Name:** PERSONAL BUSINESS INTEGRATION, LLC

**Current Principal Place of Business:**

17811 CASTLE HARBOR DRIVE  
FORT MYERS, FL 33967

**New Principal Place of Business:**

**Current Mailing Address:**

17811 CASTLE HARBOR DRIVE  
FORT MYERS, FL 33967

**New Mailing Address:**

**FEI Number:** 26-2234395

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MAXNER, JUSTIN B  
17811 CASTLE HARBOR DRIVE  
FORT MYERS, FL 33967 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: JUSTIN MAXNER

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** MAXNER, JUSTIN B  
**Address:** 17811 CASTLE HARBOR DRIVE  
**City-St-Zip:** FORT MYERS, FL 33967

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: JUSTIN MAXNER

MGR

04/08/2011

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