

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000039793

FILED  
Dec 08, 2009  
Secretary of State

Entity Name: INTELENGIN LLC

**Current Principal Place of Business:**

4485 STIRLING RD.  
SUITE 207  
DANIA BEACH, FL 33314

**New Principal Place of Business:**

4144 SW 70 CT  
MIAMI, FL 33155

**Current Mailing Address:**

PO BOX 144479  
CORAL GABLES, FL 33114

**New Mailing Address:**

FEI Number: 26-2445097      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:**

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

ESCANDELL, JOSE P  
4485 STIRLING RD.  
SUITE 207  
DANIA BEACH, FL 33314 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: JOSE ESCANDELL

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: ESCANDELL, JOSE P  
Address: 4485 STIRLING RD. SUITE 207  
City-St-Zip: DANIA BEACH, FL 33314

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

Title: MGRM ( ) Delete  
Name: MENA, ROBERT A  
Address: 4485 STIRLING RD. SUITE 207  
City-St-Zip: DANIA BEACH, FL 33314

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: JOSE ESCANDELL

MGR

12/08/2009

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