

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000063283

**FILED**  
**May 18, 2010**  
**Secretary of State**

**Entity Name:** ALTERNATIVE CONSULTING SOLUTIONS, LLC

**Current Principal Place of Business:**

14013 EYLEWOOD DR.  
WINTER GARDEN, FL 34787

**New Principal Place of Business:**

**Current Mailing Address:**

14013 EYLEWOOD DR.  
WINTER GARDEN, FL 34787

**New Mailing Address:**

**FEI Number:** 26-2909610      **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:**

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

COOPER-GREEN, BRIANA L  
14013 EYLEWOOD DRIVE  
WINTER GARDEN, FL 34787      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:** BRIANA L COOPER-GREEN

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** COOPER-GREEN, BRIANA L  
**Address:** 14013 EYLEWOOD DRIVE  
**City-St-Zip:** WINTER GARDEN, FL 34787

**Title:** MGRM  
**Name:** GREEN, MILTON D  
**Address:** 14013 EYLEWOOD DRIVE  
**City-St-Zip:** WINTER GARDEN, FL 34787

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:** MILTON D GREEN

MGRM

05/18/2010

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