

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000093106

FILED
Oct 19, 2009
Secretary of State

Entity Name: U.S. FORENSIC ASSOCIATES, L.L.C.

Current Principal Place of Business:

2202 N WEST SHORE BLVD SUITE 200
TAMPA, FL 33607 US

New Principal Place of Business:

8916 KALALAU PLACE
DIAMONDHEAD, MS 39525 US

Current Mailing Address:

2202 N WEST SHORE BLVD SUITE 200
TAMPA, FL 33607 US

New Mailing Address:

8916 KALALAU PLACE
DIAMONDHEAD, MS 39525 US

FEI Number: 74-3235528

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CLINE, BREANNE A
2202 N WEST SHORE BLVD SUITE 200
TAMPA, FL 33607 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: BREANNE A. CLINE

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: JANOWSKY, WILLIAM R
Address: 8916 KALALAU PLACE
City-St-Zip: DIAMONDHEAD, MS 39525 US

Title: MGRM (X) Delete
Name: BALENTINE, JAMES D
Address: 8706 CALUMET FARMS DRIVE
City-St-Zip: WAXHAW, NC 28173 US

ADDITIONS/CHANGES:

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

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: WILLIAM R. JANOWSKY

MGRM

10/19/2009

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