

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000098442

**FILED**  
**Oct 04, 2010**  
**Secretary of State**

**Entity Name:** LINK SOLUTIONS LLC

**Current Principal Place of Business:**

1451 W CYPRESS ROAD SUITE 300, #355  
FORT LAUDERDALE, FL 33309

**New Principal Place of Business:**

1500 W CYPRESS ROAD SUITE 302  
FORT LAUDERDALE, FL 33309

**Current Mailing Address:**

3370 NW 21 COURT  
COCONUT CREEK, FL 33066

**New Mailing Address:**

1500 W CYPRESS ROAD SUITE 302  
FORT LAUDERDALE, FL 33309

**FEI Number:** 26-3543225

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MENELAS, JACQUESSAINT  
1451 W CYPRESS ROAD SUITE 300, #355  
FORT LAUDERDALE, FL 33309 US

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

MENELAS, JACQUESSAINT  
1500 W CYPRESS ROAD SUITE 302  
FORT LAUDERDALE, FL 33309 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: JACQUESSAINT MENELAS

10/04/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: MENELAS, JACQUESSAINT  
Address: 1500 W CYPRESS ROAD SUITE 302  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: MGRM  
Name: MENELAS, SLABINE  
Address: 3370 NW 21 COURT  
City-St-Zip: COCONUT CREEK, FL 33066

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: JACQUESSAINT MENELAS

MGR

10/04/2010

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