

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000117496

Entity Name: J & A CONSULTING GROUP, LLC

FILED  
Oct 18, 2009  
Secretary of State

**Current Principal Place of Business:**

1717 W. BEDINGFIELD DRIVE  
TAMPA, FL 33603

**New Principal Place of Business:**

**Current Mailing Address:**

1717 W. BEDINGFIELD DRIVE  
TAMPA, FL 33603

**New Mailing Address:**

POST OFFICE BOX 320211  
TAMPA, FL 336792211

FEI Number: 61-1585176      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:**

JONES, JSANA E  
1717 W. BEDINGFIELD DRIVE  
TAMPA, FL 33603      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: JSANA E. JONES

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: JONES, JSANA E  
Address: 1717 W. BEDINGFIELD DRIVE  
City-St-Zip: TAMPA, FL 33603

**ADDITIONS/CHANGES:**

Title: MGRM      (X) Change      ( ) Addition  
Name: JONES, JSANA E  
Address: POST OFFICE BOX 320211  
City-St-Zip: TAMPA, FL 336792211

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: JSANA E. JONES

MGR

10/18/2009

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