

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000001356

**FILED**  
**Oct 02, 2010**  
**Secretary of State**

**Entity Name:** A 1 ADMINISTRATIVE SUPPORT, LLC

**Current Principal Place of Business:**

474 N HARBOR CITY BLVD, STE 1  
MELBOURNE, FL 32935 US

**New Principal Place of Business:**

3476 SADDLE BROOK DRIVE  
MELBOURNE, FL 32935 US

**Current Mailing Address:**

474 N HARBOR CITY BLVD, STE 1  
MELBOURNE, FL 32935 US

**New Mailing Address:**

3476 SADDLE BROOK DRIVE  
MELBOURNE, FL 32935 US

**FEI Number:** 27-1239099

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PISCIOTTA, MICHAEL  
1909 S. BABCOCK STREET  
MELBOURNE, FL 32901 US

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

PISCIOTTA, MICHAEL  
474 N. HARBOR CITY BLVD.  
MELBOURNE, FL 32901 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: MICHAEL J. PISCIOTTA

10/02/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: PISCIOTTA, MICHAEL  
Address: 474 N HARBOR CITY BLVD, STE 1  
City-St-Zip: MELBOURNE, FL 32935 US

Title: VP  
Name: ROBIN, PISCIOTTA  
Address: 3476 SADDLE BROOK DRIVE  
City-St-Zip: MELBOURNE, FL 32934

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: ROBIN PISCIOTTA

VP

10/02/2010

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