

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000037745

**FILED**  
**Mar 02, 2011**  
**Secretary of State**

**Entity Name:** MEGABYTE SOLUTIONS LLC

**Current Principal Place of Business:**

170 NE 174TH ST.  
N. MIAMI BEACH, FL 33162

**New Principal Place of Business:**

18612 NW 10TH CT  
MIAMI, FL 33169 37

**Current Mailing Address:**

18612 NW 10TH CT.  
MIAMI, FL 33169

**New Mailing Address:**

18612 NW 10TH CT  
MIAMI, FL 33169 37

**FEI Number:** 37-1583035

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

THE TAX DOCTOR LLC  
290 NW 183RD ST.  
MIAMI, FL 33169 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:** J.GAY

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** FRANCIS, TROY V  
**Address:** 18612 NW 10TH CT.  
**City-St-Zip:** MIAMI, FL 33169

**Title:** MGRM  
**Name:** DAVIS, WILLIE JR.  
**Address:** 5705 TUSCANY TERRACE  
**City-St-Zip:** TAMARAC, FL 33321

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:** TROY V FRANCIS

MGR

03/02/2011

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