

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000069298

**FILED**  
**Oct 26, 2010**  
**Secretary of State**

**Entity Name:** KIOS, LLC

**Current Principal Place of Business:**

907 NORTH WILSON AVE.  
SUITE 268  
BARTOW, FL 33830

**New Principal Place of Business:**

**Current Mailing Address:**

907 NORTH WILSON AVE.  
SUITE 268  
BARTOW, FL 33830

**New Mailing Address:**

**FEI Number:** 27-0585827

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CAMPOS-GORDON, MARIA-ISABEL  
907 NORTH WILSON AVE.  
SUITE 268  
BARTOW, FL 33830 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:** MARIA-ISABEL CAMPOS-GORDON

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** CAMPOS-GORDON, MARIA-ISABEL  
**Address:** 907 N. WILSON AVE. #268  
**City-St-Zip:** BARTOW, FL 33830

**Title:** MGR  
**Name:** GORDON, MEL  
**Address:** 907 N. WILSON AVE. #268  
**City-St-Zip:** BARTOW, FL 33830

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:** MARIA-ISABEL CAMPOS-GORDON

MGR

10/26/2010

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