

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L12000002623

**Entity Name:** LUMEN SOLUTIONS LLC

**FILED**  
**Jan 02, 2014**  
**Secretary of State**

**Current Principal Place of Business:**

4050 27TH AVE. N.  
ST. PETERSBURG, FL 33713 US

**New Principal Place of Business:**

**Current Mailing Address:**

4050 27TH AVE. N.  
ST. PETERSBURG, FL 33713 US

**New Mailing Address:**

FEI Number: 45-4194250      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

VILLAFUERTE, MARILENE  
4050 27TH AVE. N.  
ST. PETERSBURG, FL 33713 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: MARILENE VILLAFUERTE

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

Title: MGRM  
Name: VILLAFUERTE, MARILENE  
Address: 4050 27TH AVE. N.  
City-St-Zip: ST. PETERSBURG, FL 33713 US

Title: MGRM  
Name: VILLAFUERTE, JAIME  
Address: 4050 27TH AVE. N.  
City-St-Zip: ST. PETERSBURG, FL 33713 US

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 authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: MARILENE VILLAFUERTE

Electronic Signature of Authorized Person

MGRM

01/02/2014

Date