

2014 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L12000014972

FILED
Oct 14, 2014
Secretary of State

Entity Name: ABOVE ALL CERTIFIED SOLUTIONS, LLC

Current Principal Place of Business:

4290 MELISSA CT. W
JACKSONVILLE, FL 32210

New Principal Place of Business:

7259 SHARBETH DR. S
JACKSONVILLE, FL 32210

Current Mailing Address:

4290 MELISSA CT. W
JACKSONVILLE, FL 32210

New Mailing Address:

7259 SHARBETH DR. S
JACKSONVILLE, FL 32210

FEI Number: 45-4503298

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MIDDLETON, YONINA W
4290 MELISSA CT. W.
JACKSONVILLE, FL 32210 US

Name and Address of New Registered Agent:

MIDDLETON, YONINA W
7259 SHARBETH DR. S
JACKSONVILLE, FL 32210 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: YONINA W. MIDDLETON

10/14/2014

Electronic Signature of Registered Agent

Date

AUTHORIZED PERSONS:

Title: PRES
Name: BROOKS, TRACY
Address: 4101 NE 20TH DR
City-St-Zip: GAINESVILLE, FL 32605

Title: VP
Name: MIDDLETON, YONINA W
Address: 7259 SHARBETH DR. S
City-St-Zip: JACKSONVILLE, FL 32210

Title: CFO
Name: MIDDLETON, YONINA W
Address: 7259 SHARBETH DR. S
City-St-Zip: JACKSONVILLE, FL 32210

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: YONINA W. MIDDLETON

VP

10/14/2014

Electronic Signature of Authorized Person

Date