

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L12000126595

**Entity Name:** ACTION SOLUTIONS, LLC

**FILED**  
**Oct 08, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

1105 S. FORT HARRISON AVE.  
CLEARWATER, FL 33756

**New Principal Place of Business:**

**Current Mailing Address:**

1105 S. FORT HARRISON AVE.  
CLEARWATER, FL 33756

**New Mailing Address:**

**FEI Number:** 46-1134144

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCNEELY, KATHY B  
1105 S. FORT HARRISON AVE  
CLEARWATER, FL 33756 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: KATHY B. MCNEELY

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: MCNEELY, KATHY B  
Address: 1105 S.FORT HARRISON AVE.  
City-St-Zip: CLEARWATER, FL 33756

Title: MGR  
Name: MCNEELY, ANGUS  
Address: 1105 S. FORT HARRISON AVE.  
City-St-Zip: CLEARWATER, FL 33756

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: ANGUS MCNEELY

MGR

10/08/2013

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