

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L98000002428

**FILED**  
**Mar 05, 2010**  
**Secretary of State**

**Entity Name:** PARK MAGNOLIA CONSULTING, L.C.

**Current Principal Place of Business:**

2122 TRESCOTT DRIVE  
TALLAHASSEE, FL 32308

**New Principal Place of Business:**

**Current Mailing Address:**

2122 TRESCOTT DRIVE  
TALLAHASSEE, FL 32308

**New Mailing Address:**

**FEI Number:** 59-3540849      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

GEIGER, JAMES W  
2122 TRESCOTT DR  
TALLAHASSEE, FL 32308      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: JAMES W. GEIGER

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

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** GEIGER, JAMES W  
**Address:** 2122 TRESCOTT DRIVE  
**City-St-Zip:** TALLAHASSEE, FL 32308

**Title:** MGR  
**Name:** GEIGER, SHARON K  
**Address:** 2122 TRESCOTT DRIVE  
**City-St-Zip:** TALLAHASSEE, FL 32308

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: JAMES W. GEIGER

MR.

03/05/2010

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