

# 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M03000004066

FILED  
Nov 04, 2005  
Secretary of State

**Entity Name:** INTERNATIONAL OUTSOURCING SERVICES, LLC

**Current Principal Place of Business:**

9400 SOUTH DADELAND, 6TH FLOOR  
MIAMI, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

1600 W BLOOMFIELD ROAD  
SUITE 620  
BLOOMINGTON, IN 47403

**New Mailing Address:**

**FEI Number:** 35-1950733      **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:**

MATZ, BARRY  
9400 SOUTH DADELAND, 6TH FLOOR  
MIAMI, FL 33156 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: BARRY MATZ

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: FURR, BRUCE  
Address: 1600 W BLOOMFIELD RD  
City-St-Zip: BLOOMINGTON, IN 47403

Title: MGR ( ) Delete  
Name: HAUGARTH, JANEL  
Address: 101 JEFFERSON  
City-St-Zip: HOPKINS, MN 55343

Title: MGR ( ) Delete  
Name: FURR, STEVE  
Address: 100 S. ALTO MESA  
City-St-Zip: EL PASO, TX 79912

Title: MGR ( ) Delete  
Name: FURR, LANCE  
Address: 501 S MADISON STREET  
City-St-Zip: BLOOMINGTON, IN 47403

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: FURR, LANCE  
Address: 1600 WEST BLOOMFIELD RD.  
City-St-Zip: BLOOMINGTON, IN 47403

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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: WILLIAM L BABLER

CFO

11/04/2005

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