

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M08000004551

FILED
Oct 06, 2009
Secretary of State

Entity Name: ONSIGHT SOLUTIONS OF EAST COAST FLORIDA, LLC

Current Principal Place of Business:

35 FULLER ROAD
ALBANY, NY 12205

New Principal Place of Business:

Current Mailing Address:

35 FULLER ROAD
ALBANY, NY 12205

New Mailing Address:

FEI Number: 26-3317621

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH LTD., INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: NICHOLAS M WINGLE

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WINGLE, NICK
Address: 2916 KUMQUAT DRIVE
City-St-Zip: EDGEWATER, FL 32141

Title: MGR () Delete
Name: WINGLE, JOHN
Address: 4062 GEORGETOWN SQUARE
City-St-Zip: ROTTERDAM, NY 12303

ADDITIONS/CHANGES:

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: NICK WINGLE/ NICHOLAS M WINGLE

MGR

10/06/2009

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