

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M95000000244

FILED
Oct 06, 2006
Secretary of State

Entity Name: ALLSTAR KNOWLEDGE SYSTEMS, LLC

Current Principal Place of Business:

2100 S. BRIDGE PKWY, S-650
BIRMINGHAM, AL 35209

New Principal Place of Business:

2100 SOUTHBRIDGE PARKWAY
SUITE 650
BIRMINGHAM, AL 35209

Current Mailing Address:

2100 S. BRIDGE PKWY, S-650
BIRMINGHAM, AL 35209

New Mailing Address:

2100 SOUTHBRIDGE PARKWAY
SUITE 650
BIRMINGHAM, AL 35209

FEI Number: 63-1142699

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

INCorp SERVICES INC
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 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: NICOLE MOSES ON BEHALF OF INCORP SERVICES

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BRETZ, BARTLETT G
Address: 2100 S. BRIDGE PKWY, S-650
City-St-Zip: BIRMINGHAM, AL 35209

Title: MGR () Delete
Name: ALCAZAR, JOHN V
Address: 145 MALLARD POINTE DRIVE
City-St-Zip: PELHAM, AL 35124

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BRETZ, BARTLETT G
Address: 2100 SOUTHBRIDGE PARKWAY - SUITE 650
City-St-Zip: BIRMINGHAM, AL 35209

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

I hereby certify that the information supplied with this filing does not qualify for the 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: BARTLETT G. BRETZ

MGR

10/06/2006

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