

**2016 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000058043

**Entity Name:** MW CONSULTING GROUP, L.L.C.

**Current Principal Place of Business:**

1201 STONY CREEK WAY  
TALLAHASSEE, FL 32317-9434

**Current Mailing Address:**

1201 STONY CREEK WAY  
TALLAHASSEE, FL 32317-9434

**FEI Number:** 20-4998062

**Certificate of Status Desired:** Yes

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

MCKINNEY-WILLIAMS, OPAL  
123 SOUTH CALHOUN STREET  
TALLAHASSEE, FL 32301 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:** OPAL MCKINNEY-WILLIAMS

10/01/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name WILLIAMS, ALAN B  
Address 1201 STONY CREEK WAY  
City-State-Zip: TALLAHASSEE FL 32317-9434

Title MGRM  
Name MCKINNEY-WILLIAMS, OPAL  
Address 1201 STONY CREEK WAY  
City-State-Zip: TALLAHASSEE FL 32317-9434

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ALAN WILLIAMS

MANAGER

10/01/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date