

2015 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L13000045260

Entity Name: MEGALODONTIST CONSULTANTS LLC

Current Principal Place of Business:

275 WASHINGTON AVE
ENGLEWOOD, FL 34223

Current Mailing Address:

275 WASHINGTON AVE
ENGLEWOOD, FL 34223

FEI Number: 30-0778621

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WERPEN, KNUT E PRES
275 WASHINGTON AVE
ENGLEWOOD, FL 34223 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: KNUT E WERPEN

10/07/2015

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title VP
Name WERPEN , KNUT ERIK
Address 275 WASHINGTON AVE
City-State-Zip: ENGLEWOOD FL 34223

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: KNUT ERIK WERPEN

PRESIDENT

10/07/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date