

**2005 LIMITED LIABILITY COMPANY REINSTATEMENT**

**FILED  
Sep 27, 2005  
Secretary of State**

DOCUMENT# L02000018865

Entity Name: TROPICAL HOLDINGS, LLC

**Current Principal Place of Business:**

1111 KENNEDY CT  
STE 1  
TITUSVILLE, FL 32780

**New Principal Place of Business:**

**Current Mailing Address:**

1111 KENNEDY CT  
STE 1  
TITUSVILLE, FL 32780

**New Mailing Address:**

FEI Number: 47-0880134      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

FERRERO, WALTER O  
1111 KENNEDY CT #1  
TITUSVILLE, FL 32780    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: WALTER FERRERO

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGRP ( ) Delete  
Name: FERRERO, WALTER O  
Address: 1111 KENNEDY CT STE 1  
City-St-Zip: TITUSVILLE, FL 32780

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

Title: P ( ) Delete  
Name: FERRERO, OSCAR M  
Address: 1111 KENNEDY CT STE 1  
City-St-Zip: TITUSVILLE, FL 32780

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 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: WALTER FERRERO

MGRP

09/27/2005

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