

**2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000084439

**FILED  
Feb 21, 2012  
Secretary of State**

**Entity Name:** WSI EQUITY, LLC

**Current Principal Place of Business:**

4609 REECE ROAD  
PLANT CITY, FL 33566 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 3749  
PLANT CITY, FL 33563 US

**New Mailing Address:**

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

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

LEWIS, SAMANTHA D  
4609 REECE ROAD  
PLANT CITY, FL 33566 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: SAMANTHA D LEWIS

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: DEAMBROSE, SHERWOOD J  
Address: P.O. BOX 3749  
City-St-Zip: PLANT CITY, FL 33563 US

I hereby 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: SHERWOOD J DEAMBROSE

MGRM

02/21/2012

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