

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000038422

Entity Name: MAN MANAGEMENT, LC

FILED
Oct 25, 2007
Secretary of State

Current Principal Place of Business:

2846 RIVERSIDE DRIVE
SARASOTA, FL 33602

New Principal Place of Business:

1335 ROBERTS BAY LANE
SARASOTA, FL 34242

Current Mailing Address:

2846 RIVERSIDE DRIVE
SARASOTA, FL 33602

New Mailing Address:

1335 ROBERTS BAY LANE
SARASOTA, FL 34242

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

ROSS, JEREMY P
220 SOUTH FRANKLIN STREET
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

JAMES, ABBOTT
1335 ROBERTS BAY LANE
SARASOTA, FL 34242 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: JAMES ABBOTT

10/25/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ABBOTT, JAMES C
Address: 1335 ROBERTS BAY LANE
City-St-Zip: SARASOTA, FL 34242

Title: MGRM () Delete
Name: ABBOTT, MARK T
Address: 9538 59TH AVE E.
City-St-Zip: BRADENTON, FL 34202

ADDITIONS/CHANGES:

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

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

I hereby certify that the information supplied with this filing does not qualify 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: JAMES ABBOTT

MGRM

10/25/2007

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