

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000069742

Entity Name: RFN ENTERPRISES LLC

FILED  
May 13, 2009  
Secretary of State

**Current Principal Place of Business:**

3544 TABERNACLE PLACE  
TAMPA, FL 33607

**New Principal Place of Business:**

7318 HARBOURMASTER CT  
TAMPA, FL 33607

**Current Mailing Address:**

3544 TABERNACLE PLACE  
TAMPA, FL 33607

**New Mailing Address:**

7318 HARBOURMASTER CT  
TAMPA, FL 33607

FEI Number: 26-0470284      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:**

NAST, ROBERT F  
3544 TABERNACLE PLACE  
TAMPA, FL 33607    US

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

NAST, ROBERT F  
7318 HARBOURMASTER CT  
TAMPA, FL 33607    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: ROBERT F NAST

05/13/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: NAST, ROBERT F  
Address: 3544 TABERNACLE PLACE  
City-St-Zip: TAMPA, FL 33607

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change ( ) Addition  
Name: NAST, ROBERT F  
Address: 7318 HARBOURMASTER CT  
City-St-Zip: TAMPA, FL 33607

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: ROBERT F NAST

MGR

05/13/2009

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