

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 27, 2009
Secretary of State

DOCUMENT# L08000011374

Entity Name: MAD 12 ENTERPRISES, LLC

Current Principal Place of Business:

4218 WINDING RIVER WAY
LAND O LAKES, FL 34639 US

New Principal Place of Business:

Current Mailing Address:

4218 WINDING RIVER WAY
LAND O LAKES, FL 34639 US

New Mailing Address:

FEI Number: 26-1885813 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:

THE LAW OFFICES OF NICK SPRADLIN, PLLC
12000 NORTH DALE MABRY HWY
SUITE 110
TAMPA, FL 33618 US

Name and Address of New Registered Agent:

DESIMONE, MATTHEW A MGRM
4218 WINDING RIVER WAY
LAND O LAKES, FL 34639 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: MATTHEW DESIMONE

10/27/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MOORE, TODD
Address: 4218 WINDING RIVER WAY
City-St-Zip: LAND O LAKES, FL 34639 US

Title: MGRM () Delete
Name: DESIMONE, MATTHEW
Address: 4218 WINDING RIVER WAY
City-St-Zip: LAND O LAKES, FL 34639 US

Title: MGRM () Delete
Name: ACETO, PAUL
Address: 4218 WINDING RIVER WAY
City-St-Zip: LAND O LAKES, FL 34639 US

ADDITIONS/CHANGES:

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

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: MATTHEW DESIMONE

MGRM

10/27/2009

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