

2011 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L09000030286

FILED
Sep 22, 2011
Secretary of State

Entity Name: THE BOAT SAFETY ACADEMY, LLC

Current Principal Place of Business:

831 SE ST. LUCIE BLVD.
C/O WILLIAM N. OLDS
STUART, FL 34996 US

New Principal Place of Business:

1900 CEDAR AVE
C/O WILLIAM N. OLDS
LEHIGH ACRES, FL 33971 US

Current Mailing Address:

831 SE ST. LUCIE BLVD.
C/O WILLIAM N. OLDS
STUART, FL 34996 US

New Mailing Address:

1900 CEDAR AVE
C/O WILLIAM N. OLDS
LEHIGH ACRES, FL 33971 US

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

OLDS, WILLIAM N
831 SE ST. LUCIE BLVD.
STUART, FL 34996 US

Name and Address of New Registered Agent:

OLDS, WILLIAM N
1900 CEDAR AVE
LEHIGH ACRES, FL 33971 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: WILLIAM N. OLDS

09/22/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: OLDS, WILLIAM N
Address: 1900 CEDAR AVE
City-St-Zip: LEHIGH ACRES, FL 33971 US

Title: MGR
Name: OLDS, LISA M
Address: 1900 CEDAR AVE
City-St-Zip: LEHIGH ACRES, FL 33971 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: WILLIAM N. OLDS

MGRM

09/22/2011

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