

# 2014 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L12000036103

**FILED**  
**Oct 02, 2014**  
**Secretary of State**

**Entity Name:** 4 WINDS MANAGEMENT SOLUTIONS LLC

**Current Principal Place of Business:**

7137 BIMINI DR  
PORT RICHEY, FL 34668

**New Principal Place of Business:**

**Current Mailing Address:**

7137 BIMINI DR  
PORT RICHEY, FL 34668

**New Mailing Address:**

FEI Number: 45-4794023

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROGERS, MARK W  
7137 BIMINI DR.  
PORT RICHEY, FL 34668 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: MARK W ROGERS

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

\_\_\_\_\_  
Date

**AUTHORIZED PERSONS:**

Title: MGRM  
Name: ROGERS, MARK W  
Address: 7137 BIMINI DR  
City-St-Zip: PORT RICHEY, FL 34668

Title: MGRM  
Name: ROGERS, IRENE  
Address: 7137 BIMINI DR  
City-St-Zip: PORT RICHEY, FL 34668

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 authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: MARK W ROGERS

\_\_\_\_\_  
Electronic Signature of Authorized Person

MNGR

10/02/2014

\_\_\_\_\_  
Date