

# 2004 LIMITED LIABILITY COMPANY REINSTATEMENT

**FILED**  
**Oct 29, 2004**  
**Secretary of State**

DOCUMENT# M03000002091

**Entity Name:** VANTAGE POINT, LLC

**Current Principal Place of Business:**

1655 IXORA AVE.  
NAPLES, FL 341025133

**New Principal Place of Business:**

**Current Mailing Address:**

1655 IXORA AVE.  
NAPLES, FL 341025133

**New Mailing Address:**

225 S. HURSTBOURNE PKWY  
SUITE 103  
LOUISVILLE, KY 40222

**FEI Number:** 35-2071956      **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:**

BLACKETER, ALLEN  
1655 IXORA AVE.  
NAPLES, FL 341025133 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR      ( ) Delete  
Name: BLACKETER, ALLEN  
Address: 1655 IXORA AVE.  
City-St-Zip: NAPLES, FL 341025133

Title: MGR      ( ) Delete  
Name: BLACKETER, ASHLEY  
Address: 225 S.HURSTBOURNE PKWY STE. 103  
City-St-Zip: LOUISVILLE, KY 40222

Title: MGR      ( ) Delete  
Name: BLACKETER, KEN  
Address: 225 S.HURSTBOURNE PKWY STE. 103  
City-St-Zip: LOUISVILLE, KY 40222

**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 for the exemption stated in Section 119.07(3)(i), 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: ASHLEY BLACKETER

MGR

10/29/2004

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