

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000017570

**FILED**  
**Oct 10, 2009**  
**Secretary of State**

**Entity Name:** RANCH ROAD PALM TREE FARM, LLC

**Current Principal Place of Business:**

4823 W. BAY COURT  
AVENUE, FL 33611

**New Principal Place of Business:**

4823 W. BAY COURT AVENUE  
TAMPA, FL 33611

**Current Mailing Address:**

4823 W. BAY COURT  
AVENUE, FL 33611

**New Mailing Address:**

4823 W. BAY COURT AVENUE  
TAMPA, FL 33611

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:**

AMIERO, TIMOTHY W  
4823 W. BAY COURT  
AVENUE, FL 33611 US

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

AMIERO, TIMOTHY W  
4823 W. BAY COURT AVENUE  
TAMPA, FL 33611 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: TIMOTHY W AMIERO

10/10/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: VP ( ) Change (X) Addition  
Name: AMIERO, RAYMOND F MR  
Address: 7212 NORTH 10TH STREET  
City-St-Zip: TAMPA, FL 33604

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: RAYMOND F AMIERO

VP

10/10/2009

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