2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L00000009735

Entity Name: SMYERS GOLF, LLC

Address:

City-St-Zip:

1905 S. FLORIDA AVE.

LAKELAND, FL 33803

FILED Aug 20, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1401 CHAMPIONS DR. MARION, IL 62959 **Current Mailing Address: New Mailing Address:** PO BOX 1902 MARION, IL 62959 FEI Number: 59-3689034 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: Name and Address of New Registered Agent: DUVENAGE, JULIE D 1905 S. FLORIDA AVE. LAKELAND, FL 33803 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: JULIE D. DUVENAGE Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition MASTERS INTERNATIONA, L INC. Name: Name: Address: 1905 S. FLORIDA AVE. Address: City-St-Zip: LAKELAND, FL 33803 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: SMYERS, STEVEN R Name: Address: 2622 WEST MEMORIAL BLVD. Address: City-St-Zip: LAKELAND, FL 338151098 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition DUVENGE, STEPHANUS J Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: STEVEN R. SMYERS MGRM 08/20/2008