

2004 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L01000003419

Entity Name: ACOSTA, L.C.

FILED
Nov 15, 2004
Secretary of State

Current Principal Place of Business:

4969 SOUTH U.S. HIGHWAY ONE
FORT PIERCE, FL 34982

New Principal Place of Business:

Current Mailing Address:

4969 SOUTH U.S. HIGHWAY ONE
FORT PIERCE, FL 34982

New Mailing Address:

FEI Number: 65-1080329

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOBLEGARD, R.N.
401 SOUTH INDIAN RIVER DRIVE
FORT PIERCE, FL 34950 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: ACOSTA, SARA
Address: 1143 GREENBRIAR COVE
City-St-Zip: PORT ST. LUCIE, FL 34986

ADDITIONS/CHANGES:

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: SARA ACOSTA

MGR

11/15/2004

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