

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L01000007529

**Entity Name:** SECOND WIND, L.L.C.

**FILED**  
**Oct 01, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

24 SHANNON LANE  
SANTA ROSA BEACH, FL 32459

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1708  
SANTA ROSA BEACH, FL 32459

**New Mailing Address:**

**FEI Number:** 59-3718127

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KIEFER, ANN B  
261 RIDGE ROAD  
SANTA ROSA BEACH, FL 32459 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: ANN B KIEFER

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: KIEFER, ANN BONIN  
Address: 261 RIDGE ROAD  
City-St-Zip: SANTA ROSA BEACH, FL 32459

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 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: ANN B KIEFER

OWNE

10/01/2010

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