

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L01000009222

FILED
Oct 04, 2006
Secretary of State

Entity Name: REDFISH, L.L.C.

Current Principal Place of Business:

305 S GADSDEN STREET
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

305 S GADSDEN STREET
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 59-3723796 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:

GRAHAM, WILLIAM B
305 S GADSDEN STREET
TALLAHASSEE, FL 32301 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: WILLIAM B GRAHAM

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GRAHAM, WILLIAM B
Address: 305 S GADSDEN STREET
City-St-Zip: TALLAHASSEE, FL 32301

Title: MGRM () Delete
Name: MURRAY, ED
Address: 2117 JENNETTE STREET
City-St-Zip: TALLAHASSEE, FL 32312

Title: MGRM () Delete
Name: DESLOGE, BRYAN
Address: 3057 HAWKS GLEN
City-St-Zip: TALLAHASSEE, FL 32312

Title: MGRM () Delete
Name: RAINEY, RUSS
Address: 1123 MARTIN STREET
City-St-Zip: TALLAHASSEE, FL 32303

Title: MGRM () Delete
Name: LANGFORD, ROB
Address: 411 SHANTILLY TERRACE
City-St-Zip: TALLAHASSEE, FL 32312

Title: MGRM () Delete
Name: KIRBO, BEN
Address: 6173 TRAILWOOD CT
City-St-Zip: TALLAHASSEE, FL 32311

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Title: () Change () Addition
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Title: () Change () Addition
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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 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: WILLIAM B GRAHAM

MGR

10/04/2006

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