

# 2004 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L01000013246

Entity Name: NUTMEG LLC

FILED  
Oct 06, 2004  
Secretary of State

## Current Principal Place of Business:

6017 PINE RIDGE ROAD  
SUITE 262  
NAPLES, FL 34119

## Current Mailing Address:

6017 PINE RIDGE ROAD  
SUITE 262  
NAPLES, FL 34119

## New Principal Place of Business:

27499 RIVERVIEW CENTER BLVD  
SUITE 238  
BONITA SPRINGS, FL 34134

## New Mailing Address:

27499 RIVERVIEW CENTER BLVD  
SUITE 238  
BONITA SPRINGS, FL 34134

FEI Number: 59-3751371

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GIRARDIN, CAROL  
6126 TRAIL BLVD  
NAPLES, FL 34108 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: P ( ) Delete  
Name: CHAMBERS, DAVID  
Address: 6017 PINE RIDGE RD #262  
City-St-Zip: NAPLES, FL 34119

Title: VP ( ) Delete  
Name: CHAMBERS, HAROLD  
Address: 6017 PINE RIDGE RD #262  
City-St-Zip: NAPLES, FL 34119

Title: S ( ) Delete  
Name: CHAMBERS, MELESA  
Address: 6017 PINE RIDGE RD #262  
City-St-Zip: NAPLES, FL 34119

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: CHAMBERS, DAVID  
Address: 27499 RIVERVIEW CENTER BLVD #238  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: MGR (X) Change ( ) Addition  
Name: CHAMBERS, HAROLD  
Address: 27499 RIVERVIEW CENTER BLVD #238  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: MGR (X) Change ( ) Addition  
Name: CHAMBERS, MELESA  
Address: 27499 RIVERVIEW CENTER BLVD #238  
City-St-Zip: BONITA SPRINGS, FL 34134

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: DAVID CHAMBERS

MGR

10/06/2004

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