

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L01000016176

Entity Name: SOLTUDLER, LLC

FILED  
Oct 12, 2007  
Secretary of State

**Current Principal Place of Business:**

888 FRANKLIN ST  
MANAGER'S OFFICE  
JACKSONVILLE, FL 32206

**New Principal Place of Business:**

**Current Mailing Address:**

POB 40892  
JACKSONVILLE, FL 32203

**New Mailing Address:**

888 FRANKLIN ST.  
MANAGER'S OFFICE  
JACKSONVILLE, FL 32206

FEI Number: 59-3745057

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

SOLTANI, ARVIN  
114 N 18TH AVE STE B  
JACKSONVILLE BEACH, FL 32250 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: ARVIN SOLTANI

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: UDLER, IZABELLA  
Address: 114 N 18TH AVE STE B  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: MGR ( ) Delete  
Name: SOLTANI, ARVIN  
Address: 114 N 18TH AVE STE B  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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 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: ARVIN SOLTANI

MGR

10/12/2007

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