

2004 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L02000002193

FILED
Oct 19, 2004
Secretary of State

Entity Name: BLUWORLD INNOVATIONS, L.L.C.

Current Principal Place of Business:

635 W. MICHIGAN STREET
ORLANDO, FL 32805

New Principal Place of Business:

Current Mailing Address:

635 W. MICHIGAN STREET
ORLANDO, FL 32805

New Mailing Address:

FEI Number: 60-0002365 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

EFFRON, VICTOR M
635 W. MICHIGAN STREET
ORLANDO, FL 32805 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: EFFRON, LOUIS R
Address: 5013 EDGEWATER DRIVE
City-St-Zip: ORLANDO, FL

Title: MGR () Delete
Name: EFFRON, V. MARTIN
Address: 4352 TIDEWATER DRIVE
City-St-Zip: ORLANDO, FL

Title: MGR () Delete
Name: DRUMMOND, JAMES B
Address: 4560 NORTH GOLDENROD ROAD
City-St-Zip: WINTER PARK, FL

Title: MGR () Delete
Name: DRUMMOND, SEAN W
Address: 4560 NORTH GOLDENROD ROAD
City-St-Zip: WINTER PARK, FL

ADDITIONS/CHANGES:

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

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

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 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: MARTIN V. EFFRON

CFO

10/19/2004

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