

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L02000008573

**Entity Name:** GRAY WOLF, LLC

**FILED**  
**Mar 02, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

800 SIMONTON ST  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

800 SIMONTON STREET  
KEY WEST, FL 33040

**New Mailing Address:**

**FEI Number:** 04-3647193      **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:**

BURCHFIELD, GARY  
800 SIMONTON ST  
KEY WEST, FL 33040      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:** GARY BURCHFIELD

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** BURCHFIELD, GARY  
**Address:** 12 EVERGREEN AVE  
**City-St-Zip:** KEY WEST, FL 33040

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:** GARY BURCHFIELD

MR

03/02/2010

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