

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L02000009117

Entity Name: GLOER HOLDINGS, LLC

FILED
Jun 17, 2009
Secretary of State

Current Principal Place of Business:

2200 WINTER SPRINGS BLVD
106-303
WINTER SPRINGS, FL 32765

New Principal Place of Business:

Current Mailing Address:

2200 WINTER SPRINGS BLVD
106-303
WINTER SPRINGS, FL 32765

New Mailing Address:

FEI Number: 20-0194169 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:

GLOER, GARY L
2200 WINTER SPRINGS BLVD.
OVIEDO, FL 32765 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 L. GLOER

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GLOER, GARY L
Address: 10101 BLACKBERRY RD
City-St-Zip: MIMS, FL 32754 US

Title: MGRM () Delete
Name: STUART, SHANNA
Address: 10101 BLACKBERRY RD
City-St-Zip: MIMS, FL 32754

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GLOER, GARY L
Address: 10091 BLACKBERRY RD
City-St-Zip: MIMS, FL 32754 US

Title: MGRM (X) Change () Addition
Name: STUART, SHANNA
Address: 10091 BLACKBERRY RD
City-St-Zip: MIMS, FL 32754

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: GARY L. GLOER

MGMR

06/17/2009

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