

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L02000021163

FILED
Nov 16, 2009
Secretary of State

Entity Name: NEAPOLITAN ENTERPRISES LLC

Current Principal Place of Business:

255 13TH AVENUE SOUTH, SUITE 202
NAPLES, FL 34102

New Principal Place of Business:

Current Mailing Address:

255 13TH AVENUE SOUTH, SUITE 202
NAPLES, FL 34102

New Mailing Address:

FEI Number: 65-6393793 **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:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: BARBARA BURKE

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TOBIN, JOAN F
Address: 2434 BELMONT RD. N.W.
City-St-Zip: WASHINGTON, DC 20008

Title: MGRM () Delete
Name: WALKER, BARBARA Z
Address: 4324 WESTOVER PL. N.W.
City-St-Zip: WASHINGTON, DC 20016

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: TOBIN, JOAN F
Address: 2566 LANTERN LANE
City-St-Zip: NAPLES, FL 34102

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: JUSTIN A. COLLINS

DIR

11/16/2009

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