2006 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS **DOCUMENT #L02000023261** 1. Entity Name ADVANCED ENVIRONMENTAL SERVICES OF UB SEP 28 AMII: 14 SOUTHWEST FLORIDA, L.L.C. Principal Place of Business Mailing Address 7621-1B 15TH STREET EAST 19239 N DALE MABRY HIGHWAY #415 SARASOTA, FL 34243 LUTZ, FL 33548-5067 2. Principal Place of Business 3. Mailing Address 7621-1B 15TH STREET EAST Suite, Apt. #, etc. Suite, Apt. #, etc. 09212006 REIN-LLC CR2E101 (11/05) City & State City & State 4. FEI Number Applied For SARASOTA, 11-3651793 Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired П 34243 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WHITTAKER, CHRISTOPHER WHITTAKER, CHRISTOPHER Street Address (P.O. Box Number is Not Acceptable) 7621-1B 15TH STREET EAST 7050 CHATUM LIGHT RUN BRADENTON, FL 34202 City SARASOTA 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or prin agent and title if applicable (NOTE: Registered Agent signature required when re DATE Make check payable to FILE NOW!!! FEE IS \$50.00 In accordance with s. 607.193(2)(b), F.S., the limited Florida Department of State After January 1, 2007, Fee will be \$100.00 liability company did not receive the prior notice. 9. 5 MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES TITLE TITLE ☐ Delete Change ☐ Addition MGR WHITTAKER, CHRISTOPHER NAME NAME WHITTAKER, CHRISTOPHER STREET ADDRESS 7050 CHATUM LIGHT RUN STREET ADDRESS 7621-1B 15TH STREET EAST CITY-ST-ZIP BRADENTON, FL 34202 CITY-ST-71P SARASOTA, FL 34243 **4000802648學學** ¹09/28/06--01043--014 **50.00 TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME RENGTATEMENT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change TITLE ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS COY-ST-ZIP CITY-ST-7IP I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information Indicated on this report is true and accurate and that my 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. - a455

CHRISTOPHER WHITTAKER,

Date

Daytime Phone it

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE