

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L02000024368

FILED
Oct 06, 2007
Secretary of State

Entity Name: WALTER P. GLOVER ENTERPRISES, LLC

Current Principal Place of Business:

318 BROOKS STREET SE
FORT WALTON BEACH, FL 32548

New Principal Place of Business:

Current Mailing Address:

318 BROOKS STREET SE
FORT WALTON BEACH, FL 32548

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

GLOVER, WALTER P
318 BROOKS STREET
FORT WALTON BEACH, FL 32548 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: WALTER P GLOVER

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GLOVER, WALTER P
Address: 318 BROOKS STREET
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGR () Change (X) Addition
Name: GLOVER, ROBERT L
Address: 318 BROOKS ST., S.E.
City-St-Zip: FORT WALTON BEACH, FL 32548

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: WALTER P GLOVER

MGR

10/06/2007

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