

# 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L02000026044

Entity Name: AIRSEA, LLC

FILED  
Jan 10, 2005  
Secretary of State

## Current Principal Place of Business:

1350 N.W. 18TH AVENUE  
MIAMI, FL 33125

## New Principal Place of Business:

74 SW HIDEAWAY PLACE  
STUART, FL 34994

## Current Mailing Address:

1350 N.W. 18TH AVENUE  
MIAMI, FL 33125

## New Mailing Address:

PO BOX 466  
PALM CITY, FL 34991

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCALPIN, DANIEL  
1350 N.W. 18TH AVENUE  
MIAMI, FL 33125 US

## Name and Address of New Registered Agent:

MCALPIN, DANIEL  
74 SW HIDEAWAY PLACE  
STUART, FL 34994 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: DANIEL MC ALPIN

01/10/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: GRIFFIN, JAMES III  
Address: 1350 N.W. 18TH AVENUE  
City-St-Zip: MIAMI, FL 33125

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

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: GRIFFIN, JAMES III  
Address: 74 SW HIDEAWAY PLACE  
City-St-Zip: STUART, FL 34994

Title: MGRM ( ) Change (X) Addition  
Name: MC ALPIN, DANIEL  
Address: 74 SW HIDEAWAY PLACE  
City-St-Zip: STUART, FL 34994 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DANIEL MC ALPIN

MGRM

01/10/2005

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