

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L02000034725

FILED
Oct 30, 2006
Secretary of State

Entity Name: GULFSTREAM EMPLOYEE INVESTMENTS, LLC (GEI)

Current Principal Place of Business:

6646 WILLOW PARK DR.
NAPLES, FL 34109 US

New Principal Place of Business:

Current Mailing Address:

6646 WILLOW PARK DR.
NAPLES, FL 34109 US

New Mailing Address:

FEI Number: 02-0656274

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEEL, MICHAEL J
C/O GULFSTREAM EMPLOYEE INVESTMENTS LLC
1580 IXORA DR.
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

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: MICHAEL J PEEL

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR (X) Delete
Name: BACON, BONNER G JR
Address: 14906 TYBEE ISLAND CIRCLE
City-St-Zip: NAPLES, FL 34119

Title: MGR () Delete
Name: UHLAR, RENEE T
Address: 8522 SILK OAK LN
City-St-Zip: NAPLES, FL 34119

Title: MGR (X) Delete
Name: STORK, KATINA D
Address: 395 SOUTH HAVEN LANE SW
City-St-Zip: FORT MYERS, FL 33919

Title: MGR () Delete
Name: WASHINGTON, SHALONDA P
Address: 1631 16TH ST. NE
City-St-Zip: NAPLES, FL 34120

Title: MGR () Delete
Name: HOGUE, DALE
Address: 4581 26TH AVE SE
City-St-Zip: NAPLES, FL 34116

Title: S () Delete
Name: FINCH, STACEY D
Address: 4119 LAKEWOOD BLVD
City-St-Zip: NAPLES, FL 34112

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: PETER, RENEE T
Address: 14730 INDIGO LAKES CIR
City-St-Zip: NAPLES, FL 34119

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: RENEE T PETER

MGR

10/30/2006

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