

# 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000008290

Entity Name: 1493 BLUE POINT, LLC

FILED  
May 26, 2005  
Secretary of State

## Current Principal Place of Business:

1025 FIFTH AVENUE NORTH  
NAPLES, FL 34102

## New Principal Place of Business:

1493 BLUE POINT AVENUE  
NAPLES, FL 34102

## Current Mailing Address:

1025 FIFTH AVENUE NORTH  
NAPLES, FL 34102

## New Mailing Address:

1493 BLUE POINT AVENUE  
NAPLES, FL 34102

FEI Number: 42-1616223      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:

BAVIELLO, MICHAEL A JR.  
1025 FIFTH AVENUE NORTH  
NAPLES, FL 34102      US

## Name and Address of New Registered Agent:

GAMBUCCI, THOMAS J  
1493 BLUE POINT AVENUE  
NAPLES, FL 34102      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: THOMAS GAMBUCCI

05/26/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

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

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

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

## ADDITIONS/CHANGES:

Title: MBR ( ) Change (X) Addition  
Name: DUCKWALL, ELAINE T MBR  
Address: 500 COUNTY ROAD B-WEST, APT. 316  
City-St-Zip: ROSEVILLE, MN 55113 US

Title: MBR ( ) Change (X) Addition  
Name: DUCKWALL, JOHN A MBR  
Address: 973 COUNTY ROAD D-EAST  
City-St-Zip: ST. PAUL, MN 55109 US

Title: MGRM ( ) Change (X) Addition  
Name: GAMBUCCI, THOMAS J MGRM  
Address: 1493 BLUE POINT AVENUE  
City-St-Zip: NAPLES, FL 34102 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: THOMAS GAMBUCCI

MGRM

05/26/2005

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