2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000015092

Entity Name: PEAK PERFORMANCE, LLC

FILED Jul 22, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9646 HALYARDS CT.

#21

FT. MYERS, FL 33919

Current Mailing Address: New Mailing Address:

9646 HALYARDS CT.

FT. MYERS, FL 33919

FEI Number: 43-2011552 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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:

DAVIS, SHELLEY S 4386 JIB BOOM CT.

#1F FT. MYERS, FL 33919 US DAVIS, SHELLEY S 14290 MCGREGOR BLVD FT. MYERS, FL 33919 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: SHELLEY S. DAVIS 07/22/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete Name: DAVIS, SHELLEY S

Address: 4386 JIB BOOM CT. 1F City-St-Zip: FT. MYERS, FL 33919

 Title:
 MGRM
 () Delete

 Name:
 MASUCCI, JOHN J

 Address:
 9646 HALYARDS CT. #21

 City-St-Zip:
 FT. MYERS, FL 33919

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition

 Name:
 DAVIS, SHELLEY S

 Address:
 14290 MCGREGOR BLVD

 City-St-Zip:
 FT. MYERS, FL 33919

Title: () Change () Addition

Name: Address: City-St-Zip:

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: JOHN J. MASUCCI MGRM 07/22/2007