

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000015421

Entity Name: TUNNEL ROAD, LLC

FILED
Mar 08, 2005
Secretary of State

Current Principal Place of Business:

226 PALAFOX PLACE, SIXTH FLOOR
PENSACOLA, FL 32502

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 710
PENSACOLA, FL 32502

New Mailing Address:

P.O. BOX 710
PENSACOLA, FL 32591

FEI Number: 55-0844971

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHILL, LAWRENCE C
226 PALAFOX PLACE, SIXTH FLOOR
PENSACOLA, FL 32502 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: LAWRENCE C. SCHILL

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: MGRM () Change (X) Addition
Name: MERRILL, J. COLLIER
Address: 226 SOUTH PALAFOX, SIXTH FLOOR
City-St-Zip: PENSACOLA, FL 32502

Title: MGRM () Change (X) Addition
Name: MERRILL, BURNEY H
Address: 226 SOUTH PALAFOX, SIXTH FLOOR
City-St-Zip: PENSACOLA, FL 32502

Title: MGRM () Change (X) Addition
Name: MERRILL, WILLIS C
Address: 226 SOUTH PALAFOX, SIXTH FLOOR
City-St-Zip: PENSACOLA, FL 32502

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: J. COLLIER MERRILL

MGRM

03/08/2005

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