

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L03000022264

1. Entity Name
EAGLE EYE LLC



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 SEP 16 AM 8:26

Principal Place of Business
2303 CAPTAIN'S WAY
JUPITER, FL 33477

Mailing Address
2303 CAPTAIN'S WAY
JUPITER, FL 33477

2. Principal Place of Business
110 South Village Way

3. Mailing Address
110 South Village Way

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Jupiter, Florida

City & State
Jupiter, Florida

Zip
33458

Country
USA

Zip
33458

Country
USA

09132005 REIN-LLC CR2E101 (6/04)

4. FEI Number
59-3653446

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

PRZYSINDA, DAVID A
2303 CAPTAIN'S WAY
JUPITER, FL 33477

7. Name and Address of New Registered Agent

Name
Przysinda, David A.

Street Address (P.O. Box Number is Not Acceptable)
110 South Village Way

City
Jupiter

FL

Zip Code
33458

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE David A. Przysinda

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9-14-05

FILE NOW!!! FEE IS \$200.00

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

10. ADDITIONS/CHANGES

TITLE mm Przysinda, David A. 110 South Village Way ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP Jupiter, Florida 33458

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

REINSTATEMENT 04-05

500060362505
10/07/05--01048--017 **200.00

11. I hereby certify that the information supplied with this filing does not qualify 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 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.

David A. Przysinda 9-14-05