

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000025405

Entity Name: VALIANT VENTURES, LLC

FILED
Oct 11, 2007
Secretary of State

Current Principal Place of Business:

8127 NORTH PACKWOOD AVENUE
TAMPA, FL 33604

New Principal Place of Business:

Current Mailing Address:

PO BOX 360176
TAMPA, FL 33673

New Mailing Address:

FEI Number: 20-0140957 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:

QUINN, LINDA
8127 NORTH PARKWOOD AVE
TAMPA, FL 33604 US

Name and Address of New Registered Agent:

QUINN, LINDA
8127 NORTH PACKWOOD AVE
TAMPA, FL 33604 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: LINDA QUINN

10/11/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: QUINN, BRYAN
Address: PO BOX 360176
City-St-Zip: TAMPA, FL 33673 US

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

ADDITIONS/CHANGES:

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

Title: S T () Change (X) Addition
Name: QUINN, LINDA
Address: PO BOX 360176
City-St-Zip: TAMPA, FL 33604

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: BRYAN QUINN

MGRM

10/11/2007

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