

# 2004 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000034341

FILED  
Nov 12, 2004  
Secretary of State

Entity Name: BEACH BREEZE, LLC

**Current Principal Place of Business:**

1118 GULF BREEZE PARKWAY  
GULF BREEZE, FL 32562

**New Principal Place of Business:**

**Current Mailing Address:**

1118 GULF BREEZE PARKWAY  
GULF BREEZE, FL 32562

**New Mailing Address:**

1118 GULF BREEZE PARKWAY  
SUITE 202  
GULF BREEZE, FL 32562

FEI Number: 20-0977262      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:**

KIRSCHENFELD, KIM  
1717 NORTH "E" STREET, STE. 222A  
PENSACOLA, FL 32501 US

**Name and Address of New Registered Agent:**

KIRSCHENFELD, KIM  
1717 NORTH 'E' STREET  
SUITE 222A  
PENSACOLA, FL 32501 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: KIM KIRSCHENFELD

11/12/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: RAO, LEELA R  
Address: 4564 LASSASSIER DR.  
City-St-Zip: PENSACOLA, FL 32504

Title: MGR ( ) Delete  
Name: KIRSCHENFELD, KIM  
Address: 13 SEASHORE DRIVE  
City-St-Zip: PENSACOLA BEACH, FL 32561

**ADDITIONS/CHANGES:**

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

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

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: KIM KIRSCHENFELD

MGR

11/12/2004

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