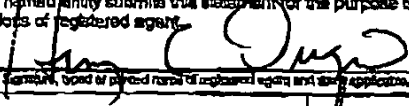


02/Feb. 15, 2005 12:15PM Porges, Hamlin Lawwood Ranch
Feb. 15, 2005 2:06PM Porges, Hamlin Lawwood Ranch
No. 4934 P. 2

**2005 LIMITED LIABILITY COMPANY
REINSTATEMENT**

FILED
05 FEB 15 PM 1:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L03000035164			
1. Entity Name RIDAWN, LLC			
Principal Place of Business 1500 NORTH TAMIAHI TRAIL SARASOTA, FL 34237		Mailing Address 1500 NORTH TAMIAHI TRAIL SARASOTA, FL 34237	
2. Principal Place of Business 6320 Venture Drive Suite, Apt. #, etc. Suite 104 City & State Bradenton, Florida Zip 34202		3. Mailing Address 6320 Venture Drive Suite, Apt. #, etc. Suite 104 City & State Bradenton, Florida Zip 34202	
Country USA		Country USA	
4. FEI Number		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent DUQUES, HENRY C 1500 NORTH TAMIAHI TRAIL SARASOTA, FL 34237		7. Name and Address of New Registered Agent Name DUQUES, HENRY C. Street Address (P.O. Box Number is Not Acceptable) 6320 Venture Drive Suite 104 City Bradenton FL Zip Code 34202	
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 		DATE 2/3/05	
FILE NOW! FEE IS \$100.00		in accordance with s. 807.193(2)(b), F.S., the limited liability company did not receive the prior notice.	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition
		President Henry C. Duques 6320 Venture Drive, Suite 104 Bradenton, Florida 34202	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
		600046666856	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(3)(c), 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.			
SIGNATURE: 		DATE 2/3/05	
SIGNATURE AND TYPE OR PRINTED NAME OF SECOND MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		DATE	



CORPORATION SERVICE COMPANY

L03000035164

ACCOUNT NO. : 072100000032

REFERENCE : 206437 8069A

AUTHORIZATION :

COST LIMIT : ~~\$100.00~~

ORDER DATE : February 15, 2005

ORDER TIME : 3:58 PM

ORDER NO. : 206437-005

CUSTOMER NO: 8069A

CUSTOMER: Ms. Connie Bridcut
Porges Hamlin Knowles &
1205 Manatee Avenue West
Bradenton, FL 34205

DOMESTIC FILINGS

NAME: RIDAWN, LLC

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan - Ext# 2955

EXAMINER'S INITIALS _____

FILED
05 FEB 15 PM 1:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
05 FEB 15 PM 4:19
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA