

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000037381

FILED
Oct 05, 2007
Secretary of State

Entity Name: VILLAGE PEOPLE INVESTMENTS, LLC

Current Principal Place of Business:

901 S. ATLANTIC AVE.
COCOA BEACH, FL 32931

New Principal Place of Business:

211 CAROLINE STREET
OFFICE
CAPE CANAVERAL, FL 32920

Current Mailing Address:

901 S. ATLANTIC AVE.
COCOA BEACH, FL 32931

New Mailing Address:

211 CAROLINE STREET
OFFICE
CAPE CANAVERAL, FL 32920

FEI Number: 20-0235410

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WELLS, JEFFERY W
901 S. ATLANTIC AVE.
COCOA BEACH, FL 32931 US

Name and Address of New Registered Agent:

WELLS, JEFFERY W
211 CAROLINE STREET
OFFICE
CAPE CANVERAL, FL 32920 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: JEFFERY W WELLS

10/05/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WELLS, JEFFERY W
Address: 901 S. ATLANTIC AVE.
City-St-Zip: COCOA BEACH, FL 32931

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

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: WELLS, JEFFERY W
Address: 211 CAROLINE STREET
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: MGR () Change (X) Addition
Name: WELLS, PATRICK
Address: 211 CAROLINE STREET
City-St-Zip: CAPE CANAVERAL, FL 32920

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: JEFFERY W WELLS

MGR

10/05/2007

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