FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 OCT 31 PM 4:43

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L03000043882

1. Entity Name
EC DOONER, LLC

Principal Place of Business
~~5386 SYCAMORE DRIVE~~
~~NAPLES, FL 34119~~

Mailing Address
~~5386 SYCAMORE DRIVE~~
~~NAPLES, FL 34119~~

2. Principal Place of Business		3. Mailing Address	
1010 Fifth Ave.South		P. O. Box 7369	
Suite, Apt. #, etc. # 300		Suite, Apt #, etc.	
City & State Naples, Florida		City & State Naples, Florida	
Zip 34102	Country Collier	Zip 34101	Country Collier

10242006 REIN-LLC CR2E101 (11/05)

4. FEI Number 65-6268869 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

KELLY, CHARLES M JR.
2390 TAMIAMI TRAIL NORTH
SUITE 204
NAPLES, FL 34103

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

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 [signature] Charles M.Kelly, Jr. 1-/27/06
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After January 1, 2007, Fee will be $200.00

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR	☐ Delete
NAME	LEE, NANCY L D	
STREET ADDRESS	~~350 SAN FERNANDO BLVD., #302~~	
CITY-ST-ZIP	~~BURBANK, CA 91502~~	
TITLE	MGR	☐ Delete
NAME	DOONER, EUGENE C	
STREET ADDRESS	5386 SYCAMORE DRIVE	
CITY-ST-ZIP	NAPLES, FL 34116	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete

10. ADDITIONS/CHANGES

TITLE		☒ Change ☐ Addition
NAME		
STREET ADDRESS	5225 Goodland Avenue	
CITY-ST-ZIP	Valley Village, CA 91607	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	000081402040 10/31/06--01084--002 **150.00	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	REINSTATEMENT 2006	☒ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Eugene C. Dooner Eugene C. Dooner, MGR 10/27/06 239-354-1254
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #