

# **2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L03000055854

**FILED**  
**Oct 09, 2007**  
**Secretary of State**

**Entity Name:** WARM WEATHER HOMES, LLC

**Current Principal Place of Business:**

10955 SE FEDERAL HIGHWAY, #11  
HOBE SOUND, FL 33455

**New Principal Place of Business:**

49 SW SEMINOLE  
STUART, FL 34994

**Current Mailing Address:**

10955 SE FEDERAL HIGHWAY, #11  
HOBE SOUND, FL 33455

**New Mailing Address:**

5213 SE INKWOOD WAY  
HOBE SOUND, FL 33455

**FEI Number:** 20-0646138      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
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:**

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

BANNER, MICHAEL  
4244 W. TENNESSEE ST.  
#185  
TALLAHASSEE, FL 32304 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: MICHAEL BANNER

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGRM      ( ) Delete  
Name: PICKENS, ROBERTA J  
Address: 5213 SE INKWOOD WAY  
City-St-Zip: HOBE SOUND, FL 33455

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

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: ROBERTA J PICKENS

MGRM

10/09/2007

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