

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000056257

**FILED**  
**Oct 27, 2008**  
**Secretary of State**

**Entity Name:** M & B MARCO INVESTMENTS, L.L.C.

**Current Principal Place of Business:**

548 SPINNAKER DRIVE  
MARCO ISLAND, FL 34145

**New Principal Place of Business:**

**Current Mailing Address:**

548 SPINNAKER DRIVE  
MARCO ISLAND, FL 34145

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:**

ROCHE, CHRISTOPHER A  
229 NORTH COLLIER BLVD.  
MARCO ISLAND, FL 34145 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: CHRISTOPHER A. ROCHE

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: DRUMMOND, MARVIN E JR.  
Address: 548 SPINNAKER DRIVE  
City-St-Zip: MARCO ISLAND, FL 34145

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

Title: MGRM ( ) Delete  
Name: DRUMMOND, BARBARA L  
Address: 548 SPINNAKER DRIVE  
City-St-Zip: MARCO ISLAND, FL 34145

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: MARVIN DRUMMOND

MGRM

10/27/2008

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