

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000056441

Entity Name: LEESHORE WEST, LLC

FILED
Oct 17, 2006
Secretary of State

Current Principal Place of Business:

22623 PCB PKWY
PANAMA CITY BEACH, FL 32413 US

New Principal Place of Business:

3912 BENBOW STREET
PANAMA CITY BEACH, FL 32408 US

Current Mailing Address:

PO BOX 611595
ROSEMARY BCH, FL 32461

New Mailing Address:

2433 THOMAS DRIVE
PMB 339
PANAMA CITY BEACH, FL 32408

FEI Number: 90-0241395 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:

OTTINGER, JOSEPH E
3912 BENBOW ST.
PANAMA CITY BCH, FL 32408 US

Name and Address of New Registered Agent:

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: JOSEPH E. OTTINGER

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: OTTINGER, JOSEPH
Address: 3912 BENBOW ST.
City-St-Zip: PANAMA CITY BEACH, FL 32408 US

Title: MGRM () Delete
Name: BOYKIN, JAMES
Address: 22519 CORAL AVE
City-St-Zip: PANAMA CITY BEACH, FL 32413 US

ADDITIONS/CHANGES:

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSEPH E. OTTINGER

MGRM

10/17/2006

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