

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000057543

Entity Name: MS LUTH, LLC

FILED
Oct 08, 2006
Secretary of State

Current Principal Place of Business:

1465 BRAMAN AVENUE
FORT MYERS, FL 33901 US

New Principal Place of Business:

Current Mailing Address:

1465 BRAMAN AVENUE
FORT MYERS, FL 33901 US

New Mailing Address:

13051 UNIVERSITY DRIVE
FORT MYERS, FL 33907 US

FEI Number: 01-0830603 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:

LUTH, MARK S
1465 BRAMAN AVENUE
FORT MYERS, FL 33901 US

Name and Address of New Registered Agent:

LUTH, MARK S
13051 UNIVERSITY DRIVE
FORT MYERS, FL 33907 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: MARK S LUTH

10/08/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GOLD, LARA A
Address: 1465 BRAMAN AVENUE
City-St-Zip: FORT MYERS, FL 33901 US

Title: MGRM () Delete
Name: LUTH, MARK
Address: 1465 BRAMAN AVENUE
City-St-Zip: FORT MYERS, FL 33901 US

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: LUTH, MARK
Address: 13051 UNIVERSITY DRIVE
City-St-Zip: FORT MYERS, FL 33907 US

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: MARK S LUTH

MGRM

10/08/2006

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