

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000007359

FILED
Nov 28, 2006
Secretary of State

Entity Name: LONE PALM ENTERPRISES LLC

Current Principal Place of Business:

4870 S.W. 78TH AVE
BUSHNELL, FL 33513

New Principal Place of Business:

4583 WOODWIND DR
DESTIN, FL 32541

Current Mailing Address:

P.O. BOX 1841
BUSHNELL, FL 33513

New Mailing Address:

4583 WOODWIND DR
DESTIN, FL 32541

FEI Number: 30-5864717

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MUELLER, KIP W
4870 SW 78TH AVE
BUSHNELL, FL 33513 US

Name and Address of New Registered Agent:

MUELLER, KIP W
4583 WOODWIND DR
DESTIN, FL 32541 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: KIP MUELLER

11/28/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PRES () Delete
Name: MUELLER, KIP W MR
Address: P.O. BOX 1841
City-St-Zip: BUSHNELL, FL 33513

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: MUELLER, KIP W MR
Address: 4583 WOODWIND DR
City-St-Zip: DESTIN, FL 32541

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: KIP MUELLER

PRES

11/28/2006

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