2007 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Nov 08, 2007
Secretary of State

DOCUMENT# L04000010763

Entity Name: GROUNDBREAKERS LLC

Current Principal Place of Business:

315 GARDNER DRIVE
FT. WALTON BEACH, FL 32548

New Principal Place of Business:

Current Mailing Address:

315 GARDNER DRIVE
FT. WALTON BEACH, FL 32548

New Mailing Address:

FEI Number: 20-0741115 **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:

STECKLEIN, MONIQUE M
367 OSBORNE DR NE
FORT WALTON BEACH, FL 32548 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: MONIQUE STECKLEIN

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title:	MGR	( ) Delete
Name:	POLK, S. TRAVIS	
Address:	315 GARDNER DRIVE	
City-St-Zip:	FT. WALTON BEACH, FL 32548	
Title:	MGR	( ) Delete
Name:	POLK, POLLY L	
Address:	315 GARDNER DRIVE	
City-St-Zip:	FT. WALTON BEACH, FL 32548	
Title:	S	( ) Delete
Name:	POLK, POLLY L	
Address:	315 GARDNER DRIVE	
City-St-Zip:	FT. WALTON BEACH, FL 32548	
Title:	T	( ) Delete
Name:	POLK, S. TRAVIS	
Address:	315 GARDNER DRIVE	
City-St-Zip:	FT. WALTON BEACH, FL 32548	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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: POLLY POLK M 11/08/2007

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