

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000011308

FILED
Nov 23, 2008
Secretary of State

Entity Name: HARRINGTON ENTERPRISES, L.L.C.

Current Principal Place of Business:

175 KINGS HWY.,
715
PORT CHARLOTTE, FL 33983

New Principal Place of Business:

Current Mailing Address:

175 KINGS HWY.,
715
PORT CHARLOTTE, FL 33983

New Mailing Address:

FEI Number: 65-0692685 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

SANDERS, SANDRA ESQ
203 WEST OAK STREET
ARCADIA, FL 34266 US

Name and Address of New Registered Agent:

JOAN, HARRINGTON M
175 KINGS HWY 715
PUNTA GORDA, FL 33983 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: JOAN M HARRINGTON

11/23/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HARRINGTON, MICHAEL J III
Address: 175 KINGS HWY., 715
City-St-Zip: PORT CHARLOTTE, FL 33983

Title: MGRM () Delete
Name: HARRINGTON, MICHAEL J JR
Address: 175 KINGS HWY., 715
City-St-Zip: PORT CHARLOTTE, FL 33983

Title: MGRM () Delete
Name: HARRINGTON, JOAN M
Address: 175 KINGS HWY., 715
City-St-Zip: PORT CHARLOTTE, FL 33983

Title: MGRM () Delete
Name: HARRINGTON, MICHAEL J IV
Address: 175 KINGS HWY., 715
City-St-Zip: PORT CHARLOTTE, FL 33983

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: HARRINGTON, MATTHEW R
Address: 175 KINGS HWY., 715
City-St-Zip: PORT CHARLOTTE, FL 33983

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: JOAN M HARRINGTON

MGRM

11/23/2008

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