

# **2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000020746

**FILED**  
**Sep 05, 2007**  
**Secretary of State**

**Entity Name:** PIXEL LUST LLC

**Current Principal Place of Business:**

1810 PINE ST  
MELBOURNE, FL 329014527 US

**New Principal Place of Business:**

**Current Mailing Address:**

1810 PINE ST  
MELBOURNE, FL 329014527 US

**New Mailing Address:**

**FEI Number:** 21-4920104

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

BRUNN, FRANK  
407 EAST NEW HAVEN AVENUE  
MELBOURNE, FL 329014507 US

**Name and Address of New Registered Agent:**

WRIGHT, SCOTT  
2285 W. EAU GALLIE BLVD.  
MELBOURNE, FL 32935 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: SCOTT WRIGHT

09/05/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: TRIVETTE, FAWN  
Address: 1810 PINE ST  
City-St-Zip: MELBOURNE, FL 329014527 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: TRIVETTE, WILLIAM  
Address: 5130 LAGUNA VISTA DRIVE  
City-St-Zip: MELBOURNE, FL 32934 US

Title: MGR ( ) Change (X) Addition  
Name: TRIVETTE, DEBORAH M  
Address: 5130 LAGUNA VISTA DRIVE  
City-St-Zip: MELBOURNE, FL 32934

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: WILLIAM TRIVETTE

MGR

09/05/2007

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