

# **2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000022741

**FILED**  
**Jan 02, 2007**  
**Secretary of State**

**Entity Name:** INNOVATIVE ALTERNATIVES LLC

**Current Principal Place of Business:**

12229 GRAY BIRCH CIR.  
ORLANDO, FL 32832

**New Principal Place of Business:**

11268 TAEDA DR  
ORLANDO, FL 32832

**Current Mailing Address:**

12229 GRAY BIRCH CIR.  
ORLANDO, FL 32832

**New Mailing Address:**

11268 TAEDA DR  
ORLANDO, FL 32832

**FEI Number:** 20-1592302      **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:**

WRIGHT, JOHN K  
12229 GRAY BIRCH CIR.  
ORLANDO, FL 32832      US

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

WRIGHT, JOHN K  
11268 TAEDA DR  
ORLANDO, FL 32832      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: JOHN WRIGHT

01/02/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: WRIGHT, JOHN  
Address: 12229 GRAY BIRCH CIR  
City-St-Zip: ORLANDO, FL 32832

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change ( ) Addition  
Name: WRIGHT, JOHN  
Address: 11268 TAEDA DR  
City-St-Zip: ORLANDO, FL 32832

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: JOHN WRIGHT

PRES

01/02/2007

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