

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000023658

Entity Name: SELL IT 4 U, LLC

FILED
Mar 28, 2008
Secretary of State

Current Principal Place of Business:

6605 SUPERIOR AVENUE
SARASOTA, FL 34231

New Principal Place of Business:

4910 FLAGSTONE DRIVE
SARASOTA, FL 34238

Current Mailing Address:

6605 SUPERIOR AVENUE
SARASOTA, FL 34231

New Mailing Address:

4910 FLAGSTONE DRIVE
SARASOTA, FL 34238

FEI Number: 20-1049285 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:

KLINGER, ROBERT W
2024 TANGLEWOOD DRIVE
SARASOTA, FL 34239 US

Name and Address of New Registered Agent:

CLARK, KIMBERLY S
4910 FLAGSTONE DRIVE
SARASOTA, FL 34238 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: KIMBERLY S CLARK

03/28/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: KLINGER, ROBERT W
Address: 2024 TANGLEWOOD DRIVE
City-St-Zip: SARASOTA, FL 34239

Title: MGRM (X) Delete
Name: KLINGER, SALLY S
Address: 2024 TANGLEWOOD DRIVE
City-St-Zip: SARASOTA, FL 34239

Title: MGRM (X) Delete
Name: CLARK, KIMBERLY S
Address: 6614 ANCHOR WAY
City-St-Zip: SARASOTA, FL 34231

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CLARK, KIMBERLY S
Address: 4910 FLAGSTONE DRIVE
City-St-Zip: SARASOTA, FL 34238

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: KIMBERLY S CLARK

MGR

03/28/2008

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