2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000023851

Entity Name: 4Q-DEP, LLC

FILED May 15, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1074 N. ORANGE AVENUE ONE S SCHOOL AVE SARASOTA, FL 34236

SUITE 500

SARASOTA, FL 34237 US

Current Mailing Address: New Mailing Address:

ONE S SCHOOL AVE 1074 N. ORANGE AVENUE

SUITE 500 SARASOTA, FL 34236 US

SARASOTA, FL 34237 US

FEI Number: 41-2136026 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GATES, CHAD L GATES, CHAD L 1074 N. ORANGE AVENUE ONE S SCHOOL AVE

SARASOTA, FL 34236 SUITE 500 SARASOTA, FL 34237 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: CHAD L GATES 05/15/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGR Title: () Delete (X) Change () Addition

GATES, CHAD L GATES, CHAD L Name: Name: 1074 N. ORANGE AVENUE Address: ONE S SCHOOL AVE SUITE 500 Address:

City-St-Zip: SARASOTA, FL 34236 City-St-Zip: SARASOTA, FL 34237

Title: MGRM Title: MGRM

() Delete (X) Change () Addition Name: 4Q, LLC Name: 4Q, LLC

Address: 1074 N. ORANGE AVENUE Address: ONE S SCHOOL AVE SUITE 500

City-St-Zip: SARASOTA, FL 34236 City-St-Zip: SARASOTA, FL 34237

Title: MGRM (X) Delete Title: () Change () Addition Name:

DEP MARKETING, LLC Name: Address: 425 EAST MCEWEN DR Address: City-St-Zip: OSPREY, FL 34229 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: CHAD L GATES **MGMR** 05/15/2009