

# **2008 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000032694

**FILED**  
**Oct 29, 2008**  
**Secretary of State**

**Entity Name:** MARSH ISLAND YACHT CLUB, L.L.C.

**Current Principal Place of Business:**

C/O PRESCOTT CAPITAL  
645 5TH AVENUE/8TH FLOOR  
NEW YORK, NY 10022

**New Principal Place of Business:**

**Current Mailing Address:**

C/O PRESCOTT CAPITAL  
645 5TH AVENUE/8TH FLOOR  
NEW YORK, NY 10022

**New Mailing Address:**

**FEI Number:** 20-1071718      **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:**

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

MARINE, CHRISTOPHER H  
979 BEACHLAND BLVD.  
VERO BEACH, FL 32963      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: CHRISTOPHER MARINE

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR      ( ) Delete  
**Name:** MANN, STEPHEN  
**Address:** 645 5TH AVENUE, 8TH FLOOR  
**City-St-Zip:** NEW YORK, NY 10022

**ADDITIONS/CHANGES:**

**Title:** MGR      (X) Change ( ) Addition  
**Name:** WOLFF, IRA  
**Address:** 645 5TH AVENUE, 8TH FLOOR  
**City-St-Zip:** NEW YORK, NY 10022

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: IRA WOLFF

MGR

10/29/2008

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