

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000041322

Entity Name: GLOBAL ONE TRUST, L.L.C.

FILED
Oct 09, 2005
Secretary of State

Current Principal Place of Business:

1161 S.W. COLORADO AVENUE
PORT ST. LUCIE, FL 34953

New Principal Place of Business:

Current Mailing Address:

1161 S.W. COLORADO AVENUE
PORT ST. LUCIE, FL 34953

New Mailing Address:

265 SW PORT ST LUCIE BLVD
105
PORT ST. LUCIE, FL 34984

FEI Number: 20-1283447 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:

HOSSLER, JO NAN
1161 S.W. COLORADO AVENUE
PORT ST. LUCIE, FL 34953 US

Name and Address of New Registered Agent:

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: JO HOSSLER

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HOSSLER, JO NAN
Address: 1161 S.W. COLORADO AVENUE
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: MGRM () Delete
Name: SPECTOR, BRIAN H
Address: 2009 S.W. VILLANOVA ROAD
City-St-Zip: PORT ST. LUCIE, FL 34953

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: SPECTOR, BRIAN H
Address: 140 SW MARK COURT
City-St-Zip: PORT ST. LUCIE, FL 34953

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JO HOSSLER

MGRM

10/09/2005

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