## 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L04000047583

Entity Name: BUDDY RILEY, LLC

Address:

City-St-Zip:

4545 E. CTY HWY 30-A. SUITE C302

SANTA ROSA BEACH, FL 32459

FILED Oct 31, 2008 Secretary of State

**New Principal Place of Business: Current Principal Place of Business:** 4545 E. CTY HWY 30-A C302 SANTA ROSA BEACH, FL 32459 **New Mailing Address: Current Mailing Address:** 4545 E. CTY HWY 30-A C302 SANTA ROSA BEACH, FL 32459 FEI Number: 20-1284304 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: CAPERTON, ADAM A 4545 E. CTY HWY 30-A C302 SANTA ROSA BEACH, FL 32459 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: STEPHANIE HAMMOND-CAPERTON Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete CAPERTON, ADAM A Name: Name: Address: 4545 E. CTY HWY 30-A, SUITE C302 Address: City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition Name: HAMMOND-CAPERTON, STEPHANIE 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: STEPHANIE HAMMOND-CAPERTON MGRM 10/31/2008