

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000048252

Entity Name: PAYDIRT PROPERTIES, LLC

FILED
Oct 12, 2005
Secretary of State

Current Principal Place of Business:

15981 CATALPA COVE DR.
FT. MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

15981 CATALPA COVE DR.
FT. MYERS, FL 33908

New Mailing Address:

FEI Number: 01-0817645 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:

PARKER, SEYMOUR
15981 CATALPA COVE DR.
FT. MYERS, FL 33908 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: SEYMOUR PARKER

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PARKER, SEYMOUR
Address: 15981 CATALPA COVE DR.
City-St-Zip: FT. MYERS, FL 33908

Title: MGRM () Delete
Name: PARKER, RIMA
Address: 15981 CATALPA COVE DR.
City-St-Zip: FT. MYERS, FL 33908

Title: MGRM () Delete
Name: PARKER, ALISSA
Address: 15981 CATALPA COVE DR.
City-St-Zip: FT. MYERS, FL 33908

Title: MGRM () Delete
Name: PARKER, ADAM
Address: 15981 CATALPA COVE DR.
City-St-Zip: FT. MYERS, FL 33908

ADDITIONS/CHANGES:

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

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

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 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: SEYMOUR PARKER

MGR

10/12/2005

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