

# **2005 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000049189

**FILED**  
**Dec 16, 2005**  
**Secretary of State**

**Entity Name:** HOME RUN INNOVATIONS, LLC.

**Current Principal Place of Business:**

5940 PELICAN BAY PLAZA  
#1103  
GULFPORT, FL 33707

**New Principal Place of Business:**

9524 BLIND PASS RD  
ST. PETE BEACH, FL 33706

**Current Mailing Address:**

9524 BLIND PASS RD  
ST. PETE BEACH, FL 33706

**New Mailing Address:**

FEI Number: 56-2334270      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:**

WOODY, STEVE L  
5940 PELICAN BAY PLAZA  
#1103  
GULFPORT, FL 33707 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: STEVE L WOODY

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Change (X) Addition  
Name: WOODY, STEVE L  
Address: 5940 PELICAN BAY PLAZA #1103  
City-St-Zip: GULFPORT, FL 33707

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: STEVE L WOODY

MGRM

12/16/2005

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