

# 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000050362

FILED  
Sep 30, 2005  
Secretary of State

**Entity Name:** BACKCOUNTRY INVESTMENTS LLC

**Current Principal Place of Business:**

475 PARK AVENUE  
BOCA GRANDE, FL 33921

**New Principal Place of Business:**

**Current Mailing Address:**

475 PARK AVENUE  
BOCA GRANDE, FL 33921

**New Mailing Address:**

P O BOX 598  
BOCA GRANDE, FL 33921

**FEI Number:**                      **FEI Number Applied For (X)**                      **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:**

MCHUGH, DAVID  
475 PARK AVENUE  
BOCA GRANDE, FL 33921      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: DAVID MCHUGH

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR                      ( ) Delete  
Name: MCHUGH, DAVID  
Address: PO BOX 598  
City-St-Zip: BOCA GRANDE, FL 33921

Title: MGR                      ( ) Delete  
Name: PORTER, RANDY  
Address: PO BOX 598  
City-St-Zip: BOCA GRANDE, FL 33921

Title: MGR                      ( ) Delete  
Name: MILLER, ROBERT  
Address: PO BOX 598  
City-St-Zip: BOCA GRANDE, FL 33921

Title: MGR                      ( ) Delete  
Name: GIORDANO, JOE  
Address: PO BOX 598  
City-St-Zip: BOCA GRANDE, FL 33921

**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: DAVID MCHUGH

MGR

09/30/2005

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