

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000056308

FILED
Oct 12, 2006
Secretary of State

Entity Name: WELLSPRING ART WORKS L.L.C.

Current Principal Place of Business:

24242 PAINTER DRIVE
LAND O LAKES, FL 34639

New Principal Place of Business:

7433 AMBLESIDE DRIVE
LAND O LAKES, FL 34637

Current Mailing Address:

24242 PAINTER DRIVE
LAND O LAKES, FL 34639

New Mailing Address:

7433 AMBLESIDE DRIVE
LAND O LAKES, FL 34637

FEI Number: 43-2058791 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

CROSS, AMY L
24242 PAINTER DRIVE
LAND O LAKES, FL 34639 US

Name and Address of New Registered Agent:

CROSS, AMY L
7433 AMBLESIDE DRIVE
LAND O LAKES, FL 34637 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: AMY L. CROSS

10/12/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CROSS, AMY L
Address: 24242 PAINTER DRIVE
City-St-Zip: LAND O LAKES, FL 34639

Title: MGRM () Delete
Name: CROSS, JEFFREY D
Address: 24242 PAINTER DRIVE
City-St-Zip: LAND O LAKES, FL 34639

Title: MGRM () Delete
Name: NEHR, BARRION D
Address: 24242 PAINTER DRIVE
City-St-Zip: LAND O LAKES, FL 34639

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CROSS, AMY L
Address: 7433 AMBLESIDE DRIVE
City-St-Zip: LAND O LAKES, FL 34637

Title: MGRM (X) Change () Addition
Name: CROSS, JEFFREY D
Address: 7433 AMBLESIDE DRIVE
City-St-Zip: LAND O LAKES, FL 34637

Title: MGRM (X) Change () Addition
Name: NEHR, BARRION D
Address: 7433 AMBLESIDE DRIVE
City-St-Zip: LAND O LAKES, FL 34637

I hereby certify that the information supplied with this filing does not qualify for the 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: AMY L. CROSS

MGRM

10/12/2006

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