## 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L04000068854

OCALA, FL 34474

City-St-Zip:

Entity Name: MOTI HOLDINGS LLC

FILED Sep 29, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2170 SW 37TH ST. 3306 SW 26TH AVE OCALA, FL 34474 SUITE 402 OCALA, FL 34471 **Current Mailing Address: New Mailing Address:** 3306 SW 26TH AVE 2170 SW 37TH ST. OCALA, FL 34474 SUITE 402 OCALA, FL 34471 FEI Number: 20-1659025 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: Name and Address of New Registered Agent: MITRA, PRAMILA 2170 SW 37TH ST. OCALA, FL 34474 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: PRAMILA MITRA Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete MITRA, PURUSHOTTAM Name: Name: 2170 SW 37TH ST. Address: Address: City-St-Zip: OCALA, FL 34474 City-St-Zip: Title: MGRM () Delete Title: MGRM (X) Change ( ) Addition MITRA, PRAMILA Name: MITRA, PRAMILA Name: Address: 2170 SW 37TH ST. Address: 2170 SW 37TH ST City-St-Zip: OCALA, FL 34474 City-St-Zip: OCALA, FL 34474 Title: MGRM () Delete Title: () Change () Addition SINGH, PRAHAV Name: Name: Address: 2170 SW 37TH ST. Address: City-St-Zip: OCALA, FL 34474 City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition SINGH, POORITA Name: Name: 2170 SW 37TH ST. Address: Address: City-St-Zip: OCALA, FL 34474 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition SINGH, PRIAMVADA Name: Name: 2170 SW 37TH ST. Address: Address: City-St-Zip: OCALA, FL 34474 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition SINGH, PUSHKAR Name: Name: Address: 2170 SW 37TH ST. Address:

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.

City-St-Zip:

SIGNATURE: PRAMILA MITRA OWNE 09/29/2009