

# 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000071309

**FILED**  
**Oct 31, 2005**  
**Secretary of State**

**Entity Name:** BUZZOFF MOSQUITO OF NORTH FLORIDA, LLC

**Current Principal Place of Business:**

117 RUE CARIBE  
MIRAMAR BEACH, FL 32550

**New Principal Place of Business:**

P. O. BOX 2269  
SANTA ROSA BEACH, FL 32459

**Current Mailing Address:**

117 RUE CARIBE  
MIRAMAR BEACH, FL 32550

**New Mailing Address:**

P. O. BOX 2269  
SANTA ROSA BEACH, FL 32459

**FEI Number:** 20-1740415      **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:**

RUNNELS, DAVAGE J III  
4399 COMMONS DRIVE EAST  
SUITE 300  
DESTIN, FL 32541 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:** DAVAGE J. RUNNELS, III

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM      ( ) Delete  
**Name:** SHAHID, CARY  
**Address:** 117 RUE CARIBE  
**City-St-Zip:** MIRAMAR BEACH, FL 32550

**Title:** MGR      (X) Delete  
**Name:** TOWNSEND, BYRON  
**Address:** 69 NORTH RYAN STREET  
**City-St-Zip:** SEAGROVE BEACH, FL 32459

**ADDITIONS/CHANGES:**

**Title:** MGRM      (X) Change ( ) Addition  
**Name:** TOWNSEND, BYRON  
**Address:** 78 SPOTTED DOLPHIN; P.O. BOX 2269  
**City-St-Zip:** SANTA ROSA BEACH, FL 32459

**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:** BYRON TOWNSEND

MGRM

10/31/2005

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