

# **2008 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000071705

**FILED**  
**Oct 20, 2008**  
**Secretary of State**

**Entity Name:** WHITEHILL AGENCY MANAGEMENT, L.L.C.

**Current Principal Place of Business:**

10309 MEDICIS PLACE  
WELLINGTON, FL 33467 US

**New Principal Place of Business:**

150 NE 6TH AVE  
C  
DELRAY BEACH, FL 33483 US

**Current Mailing Address:**

10309 MEDICIS PLACE  
WELLINGTON, FL 33467 US

**New Mailing Address:**

150 NE 6TH AVE  
C  
DELRAY BEACH, FL 33483 US

**FEI Number:** 20-1631732      **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:**

SPITALNY, TOM  
10309 MEDICIS PLACE  
WELLINGTON, FL 33467 US

**Name and Address of New Registered Agent:**

SPITALNY, TOM  
150 NE 6TH AVE.  
C  
DELRAY BEACH, FL FL, 33483 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: THOMAS J SPITALNY

10/20/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SPITALNY, THOMAS J  
Address: 10309 MEDICIS PLACE  
City-St-Zip: WELLINGTON, FL 33467

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: SPITALNY, THOMAS J  
Address: 150 NE 6TH AVE , APT C  
City-St-Zip: DELRAY BEACH, FL 33483

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.

SIGNATURE: THOMAS SPITALNY

MGRM

10/20/2008

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