

# **2006 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000073337

Entity Name: WWW.LOVEPALMCOAST, LLC

**FILED**  
**Mar 16, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

82 OSPREY CIRCLE  
PALM COAST, FL 32137

**New Principal Place of Business:**

29 COLECHESTER LANE  
PALM COAST, FL 32137

**Current Mailing Address:**

82 OSPREY CIRCLE  
PALM COAST, FL 32137

**New Mailing Address:**

29 COLECHESTER LANE  
PALM COAST, FL 32137

FEI Number: 20-1705925      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:**

CANDIDO, JANINE  
82 OSPREY CIRCLE  
PALM COAST, FL 32137      US

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

CANDIDO, JANINE  
29 COLECHESTER LANE  
PALM COAST, FL 32137      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: JANINE CANDIDO

03/16/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: CANDIDO, JANINE  
Address: 82 OSPREY CIRCLE  
City-St-Zip: PALM COAST, FL 32137

**ADDITIONS/CHANGES:**

Title: PRES      (X) Change ( ) Addition  
Name: CANDIDO, JANINE  
Address: 29 COLECHESTER LANE  
City-St-Zip: PALM COAST, FL 32137

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: JANINE CANDIDO

PRES

03/16/2006

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