

# **2005 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000073574

Entity Name: OURANOS LLC

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

**Current Principal Place of Business:**

45 CHOCHISE COURT  
PALM COAST, FL 32137

**New Principal Place of Business:**

**Current Mailing Address:**

45 CHOCHISE COURT  
PALM COAST, FL 32137

**New Mailing Address:**

FEI Number: 04-3808671

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BRODNAX, CLARENCE W  
45 CHOCHISE COURT  
PALM COAST, FL 32137 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: CLARENCE BRODNAX

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BRODNAX, CLENCE W  
Address: 45 CHOCHISE COURT  
City-St-Zip: PALM COAST, FL 32137

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: BRODNAX, CLENCE W  
Address: 45 CHOCHISE COURT  
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 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: CLARENCE BRODNAX

MGMR

10/31/2005

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