

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000074438

Entity Name: NVO, LLC

FILED
Jul 06, 2009
Secretary of State

Current Principal Place of Business:

2213 MAIN STREET
FORT MYERS, FL 33901 US

New Principal Place of Business:

Current Mailing Address:

2213 MAIN STREET
FORT MYERS, FL 33901 US

New Mailing Address:

FEI Number: 20-1807548 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:

Name and Address of New Registered Agent:

KURT A. STREYFFELER, P.A.
1422 HENDRY STREET
SUITE 302
FORT MYERS, FL 33901 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: KURT A STREYFFELER

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SULLIVAN, MICHAEL
Address: 8365 SILVER BIRCH WAY
City-St-Zip: LEHIGH ACHERS, FL 33971 US

Title: MGRM () Delete
Name: KOHN, JASON
Address: 2213 MAIN STREET
City-St-Zip: FORT MYERS, FL 33901 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GALLUP, DAWN
Address: 4308 NE 21ST AVE
City-St-Zip: CAPE CORAL, FL 33909 US

Title: MGRM (X) Change () Addition
Name: SILVERBERG, ALAN
Address: 118 SW 13TH TERRACE
City-St-Zip: CAPE CORAL, FL 33991 US

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: DAWN GALLUP

MGRM

07/06/2009

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