

# **2006 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000081062

**FILED**  
**Sep 21, 2006**  
**Secretary of State**

**Entity Name:** GULF COAST STORAGE SOLUTIONS OF PENSACOLA LLC

**Current Principal Place of Business:**

2943 CREOLE WAY  
PENSACOLA, FL 32526 US

**New Principal Place of Business:**

9400 ADDA LANE  
WALNUT HILL, FL 32568 US

**Current Mailing Address:**

2943 CREOLE WAY  
PENSACOLA, FL 32526 US

**New Mailing Address:**

9400 ADDA LANE  
WALNUT HILL, FL 32568 US

**FEI Number:** 20-3083673

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOGAN, ANTHONY B  
2943 CREOLE WAY  
PENSACOLA, FL 32526 US

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

HOGAN, ANTHONY B  
9400 ADDA LANE  
WALNUT HILL, FL 32568 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: ANTHONY B HOGAN

09/21/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: HOGAN, ANTHONY B  
Address: 2943 CREOLE WAY  
City-St-Zip: PENSACOLA, FL 32526

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: HOGAN, ANTHONY B  
Address: 9400 ADDA LANE  
City-St-Zip: WALNUT HILL, FL 32568

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: ANTHONY B HOGAN

MGR

09/21/2006

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