

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 06, 2006
Secretary of State

DOCUMENT# L04000081172

Entity Name: REDFISH HARBOR, LLC

Current Principal Place of Business:

223 W GREGORY
PENSACOLA, FL 32502

New Principal Place of Business:

226 PALAFOX PL STE 202
PENSACOLA, FL 32502

Current Mailing Address:

223 W GREGORY
PENSACOLA, FL 32502

New Mailing Address:

226 PALAFOX PL STE 202
PENSACOLA, FL 32502

FEI Number: 03-0550091

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALBERTELLI & ASSOCIATES, P.L.
330 A1A NORTH STE. 324
PONTE VEDRA BEACH, FL 32082 US

Name and Address of New Registered Agent:

MCDONALD, FLEMING, MOORHEAD, ET AL, LLP
25 W GOVERNMENT ST
PENSACOLA, FL 32502 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: STEPHEN R MOORHEAD

10/06/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: M () Delete
Name: PAIR, MATTHEW
Address: 223 W GREGORY
City-St-Zip: PENSACOLA, FL 32502

Title: M () Delete
Name: HAYWARD, ASHTON III
Address: 223 W GREGORY
City-St-Zip: PENSACOLA, FL 32502

Title: M () Delete
Name: BELL, ALLAN
Address: 223 W GREGORY
City-St-Zip: PENSACOLA, FL 32502

Title: M () Delete
Name: RAWSON, CODY
Address: 223 W GREGORY
City-St-Zip: PENSACOLA, FL 32502

ADDITIONS/CHANGES:

Title: M (X) Change () Addition
Name: PAIR, MATTHEW J
Address: 226 S PALAFOX PL STE 202
City-St-Zip: PENSACOLA, FL 32502

Title: M (X) Change () Addition
Name: HAYWARD, ASHTON J III
Address: 226 S PALAFOX PL STE 202
City-St-Zip: PENSACOLA, FL 32502

Title: M (X) Change () Addition
Name: BELL, W ALLAN
Address: 226 S PALAFOX PL STE 202
City-St-Zip: PENSACOLA, FL 32502

Title: M (X) Change () Addition
Name: RAWSON, CODY
Address: 106 STONE BLVD
City-St-Zip: CANTONMENT, FL 32533

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: ASHTON J HAYWARD, III

AJH

10/06/2006

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