

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000081579

Entity Name: INDIAN PASS CONDOS, LLC

FILED
Oct 18, 2005
Secretary of State

Current Principal Place of Business:

304 BAY STREET SOUTH
BRADENTON BEACH, FL 34214

New Principal Place of Business:

Current Mailing Address:

PO BOX 1861
MUSKOGEE, OK 74402

New Mailing Address:

FEI Number: 20-1861809

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROBERTS, CARLILE
304 BAY STREET SOUTH
BRADENTON BEACH, FL 34214 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: CARLILE ROBERTS

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: R CARLILE ROBERTS TR, UST DATED 8-2- 9 9
Address: 1918 NORTH 11TH STREET
City-St-Zip: MUSKOGEE, OK 74401

Title: MGRM () Delete
Name: RYKER YOUNG, INC.,
Address: PO BOX 1267
City-St-Zip: FT. GIBSON, OK 74434

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: R. CARLILE ROBERTS

MANG

10/18/2005

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