

**2005 LIMITED LIABILITY COMPANY REINSTATEMENT**

**FILED  
Oct 17, 2005  
Secretary of State**

DOCUMENT# L04000082058

Entity Name: SUNNY PALMS INVESTMENT, LLC

**Current Principal Place of Business:**

**New Principal Place of Business:**

PO BOX 152411  
CAPE CORAL, FL 339152411

**Current Mailing Address:**

**New Mailing Address:**

PO BOX 152411  
CAPE CORAL, FL 339152411

FEI Number: 20-2627753      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:**

BOLANOS TRUXTON, P.A.  
12800 UNIVERSITY DR  
SUITE 350  
FT MYERS, FL 33907 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: BOLANOS, TRUXTON, P.A.

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGR      ( ) Delete  
Name: PETERS, LINDA M  
Address: PO BOX 152411  
City-St-Zip: CAPE CORAL, FL 339152411

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: LINDA M. PETERS

MGR

10/17/2005

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