

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000086216

Entity Name: GULFVIEW, LLC

FILED  
Oct 25, 2007  
Secretary of State

**Current Principal Place of Business:**

5410 W. TYSON AVE.  
F  
TAMPA, FL 33611

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 13245  
TAMPA, FL 33681

**New Mailing Address:**

FEI Number: 75-3177425      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:**

GLOVER, LARRY  
5000 W GANDY BLVD., E21  
TAMPA, FL 33611      US

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

GLOVER, LARRY  
5410 W. TYSON AVE.  
TAMPA, FL 33611      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: LARRY GLOVER

10/25/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: GLOVER, LARRY  
Address: PO BOX 13245  
City-St-Zip: TAMPA, FL 33681

Title: MGR      ( ) Delete  
Name: GLOVER, STACY  
Address: P.O. BOX 13245  
City-St-Zip: TAMPA, FL 33681

Title: MGR      ( ) Delete  
Name: GLOVER, TED L  
Address: P.O. BOX 13245  
City-St-Zip: TAMPA, FL 33681

**ADDITIONS/CHANGES:**

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

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 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: LARRY GLOVER

MGR

10/25/2007

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