

# **2006 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000092884

**FILED**  
**Oct 26, 2006**  
**Secretary of State**

**Entity Name:** MOBILITY INNOVATIONS, LLC

**Current Principal Place of Business:**

6826 LUMBERJACK LANE  
OCOEE, FL 34761

**New Principal Place of Business:**

5457 LAKE MARGARET DRIVE  
D  
ORLANDO, FL 32812

**Current Mailing Address:**

6826 LUMBERJACK LANE  
OCOEE, FL 34761

**New Mailing Address:**

5457 LAKE MARGARET DRIVE  
D  
ORLANDO, FL 32812

**FEI Number:**                      **FEI Number Applied For (X)**                      **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:**

GAGNE, MICHELLE  
6826 LUMBERJACK LANE  
OCOEE, FL 34761    US

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

GAGNE, MICHELLE M PRESIDE  
5457 LAKE MARGARET DRIVE  
D  
ORLANDO, FL 32812    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: MICHELLE M GAGNÉ

10/26/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title:            PRES            ( ) Delete  
Name:           GAGNE, MICHELLE  
Address:        6826 LUMBERJACK LANE  
City-St-Zip:    OCOEE, FL 34761

**ADDITIONS/CHANGES:**

Title:            PRES            (X) Change ( ) Addition  
Name:           GAGNE, MICHELLE M  
Address:        5457 LAKE MARGARET DRIVE #D  
City-St-Zip:    ORLANDO, FL 32812

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: MICHELLE M GAGNÉ

PRES

10/26/2006

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