

# 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000093026

Entity Name: MAURICE, LLC

FILED  
Oct 05, 2005  
Secretary of State

**Current Principal Place of Business:**

2437 ODESSA LANE  
PUNTA GORDA, FL 33983

**New Principal Place of Business:**

**Current Mailing Address:**

2437 ODESSA LANE  
PUNTA GORDA, FL 33983

**New Mailing Address:**

FEI Number: 20-2102263

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SLABBINCK, MARC M  
2437 ODESSA LANE  
PUNTA GORDA, FL 33983 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: MARC SLABBINCK

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MR ( ) Change (X) Addition  
Name: SLABBINCK, MARC H  
Address: GROTE THEMS 75  
City-St-Zip: VARSENARE, WV 8490 BE

Title: MR ( ) Change (X) Addition  
Name: SLABBINCK, MARC M  
Address: 2437 ODESSA LN  
City-St-Zip: PUNTA GORDA, FL 33983 US

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: MARC SLABBINCK

MR

10/05/2005

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