## 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

REINSTATEMENT										
DOCUI		2								
INDIÁN RIVER INVESTMENT COMPANY, LLC					FILED					
Principal Place of Business Mailing Address						2007 NOV	12 [	J. A.E.		
	DIAN RIVER DR CH, FL 34957	614 CEDAR SIDE CIR NE PALM BAY, FL 32905			2001 NOV 13 ₱ 3: 25					
JENSEN DEN	M, IL 37307	1 ALM DA1, 1 E 32303			1 18811811 8	SECRETA	ARY OF S	IATE	FS1 81 1881	
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			10242007	REIN-LLC	CR2E10	1 (1/07)		
City & State		City & State			4. FEI Number         Applied For           20-22899752         Not Applicable					
Zip	Country	Zip	Country		5. Certificate of Status Desired S5.00 Additional Fee Required					
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name						
WHEELER, LAURA M										
	R SIDE CIRCLE NE /, FL 32905		Street	Street Address (P.O. Box Number is Not Acceptable)						
FALINI DA I	,1 6 32303									
			City	-			FL	Zip Code	;	
	named entity submits this statement fo	or the purpose of changing its re	egistered office of	or register	ed agent, or bo	oth, in the State of Fl	orida. I am far	niliar with,	and accept	
SIGNATURE .							_			
SIGIVATORIE :	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Agent alg	nature require	ed when reinstating	)	DATE			
FILE NOW!!! FEE IS \$150.00 After January 1, 2008, Fee will be \$200.00							ke check pay a Departmer		•	
9.	MANAGING MEMBE	ERS/MANAGERS	10.			ADDITIONS	/CHANGES			
TITLE	MGRM MORROW, W	☐ Delete	TITLE NAME				[	Change	Addition	
NAME STREET ADDRESS	2400 NE INDIAN RIVER DRIVE		STREET ADDRESS		[][] 10.700	i <b>01114</b> ; /0701003-	6585		,	
CITY-ST-ZIP	JENSEN BEACH, FL 34957		CITY-ST-ZIP		10730.					
TITLE NAME	MGRM NEHEZ, S	☐ Delete	TITLE NAME				Į.	Change	☐ Addition	
STREET ADDRESS	2400 NE INDIAN RIVER DRIVE		STREET ADDRESS							
CITY-ST-ZIP	JENSEN BEACH, FL 34957	<u></u>	CITY-ST-ZIP							
TITLE NAME	MGRM NEHEZ, R	☐ Delete	TITLE NAME				[	Change	Addition	
STREET ADDRESS	2400 NE INDIAN RIVER DRIVE		STREET ADDRESS							
CITY-ST-ZIP	JENSEN BEACH, FL 34957	<u></u>	CITY-ST-ZIP						<b>1</b>	
TITLE NAME		☐ Delete	TITLE NAME	MGRI Morro			L	Change	Addition	
STREET ADDRESS			STREET ADDRESS		NE Indian F	River Drive				
CITY-ST-ZIP			CITY-ST-ZIP	Jense	n Beach, F	L 34957			- Andrew	
TITLE NAME		☐ Delete	TITLE NAME					Change	☐ Addition	
STREET ADDRESS			STREET ADDRESS	(C)	en e	PATTAR	PAPP	06-0	57	
CITY-ST-ZIP		- ma	CITY-ST-ZIP	T.	<b>定制制</b>	TATEM	<del></del>			
TITLE NAME		☐ Delete	TITLE NAME					- Considerate	<b>State Ma</b> dition	
STREET ADDRESS			STREET ADDRESS							
CITY-ST-ZIP			CITY-ST-ZIP	1	i- Observe 412	Clasida Castrana 14	hardhau marailé i si	hat the infe	rmation	
<ol><li>11. Thereby of</li></ol>	certify that the information supplied with	n this tiling does not quality for t	ne exemptions of	contained	in Unapter 119	, riorida Statutes. I 1	urmer certify to	iat the Info	mallon	

I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Chapter 119, Florida Statutes. I further density that the information indicated on this report is true and accurate and that my 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: MORLOW Date OF SIGNING MANAGER, OR AUTHORIZED REPRESENTATIVE Date

1 112-78-0639