2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000009758

Entity Name: ATLANTIC SAFETY TECHNOLOGIES, L.L.C.

FILED Jun 17, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

311 MILLHOUSE DR 1997 CLARA MATHIS ROAD FRANKLIN, TN 37064 SPRING HILL, TN 37174

Current Mailing Address: New Mailing Address:

311 MILLHOUSE DR 1997 CLARA MATHIS ROAD FRANKLIN, TN 37064 SPRING HILL, TN 37174

FFI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

BLACKSHEAR, DAWSON 43154 WOODLAND LANE CALLAHAN, FL 32011

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: DAWSON BLACKSHEAR

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

MGR Title: (X) Change () Addition () Delete SAYLER, ALLEN SAYLER, ALLEN Name: Name: Address: 311 MILLHOUSE DR Address: 1997 CLARA MATHIS ROAD City-St-Zip: FRANKLIN, TN 37064 City-St-Zip: SPRING HILL, TN 37174

(X) Change () Addition Title: MGRM () Delete Title: MGRM Name: SAYLER, DIANA P Name: SAYLER, DIANA P Address: 311 MILLHOUSE DR Address: 1997 CLARA MATHIS ROAD

City-St-Zip: FRANKLIN, TN 37064 City-St-Zip: SPRING HILL, TN 37174

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: ALLEN SALYER 06/17/2008