

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000017811

**FILED**  
**Apr 24, 2010**  
**Secretary of State**

**Entity Name:** SHADOW LAWN DRIVE, LLC

**Current Principal Place of Business:**

5401 SHADOW LAWN DRIVE  
SARASOTA, FL 34242

**New Principal Place of Business:**

**Current Mailing Address:**

5401 SHADOW LAWN DRIVE  
SARASOTA, FL 34242

**New Mailing Address:**

**FEI Number:** 06-1580348

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WERNER, WENDY J MS  
5401 SHADOW LAWN DRIVE  
SARASOTA, FL 34242 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: WENDY J WERNER

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: WENDY, WERNER J  
Address: 5401 SHADOWLAWN DRIVE  
City-St-Zip: SARASOTA, FL 34242

I hereby 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: WENDY J WERNER

MGRM

04/24/2010

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