

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000022470

**FILED**  
**Feb 15, 2007**  
**Secretary of State**

**Entity Name:** SARASOTA BEACH PROPERTY, LLC

**Current Principal Place of Business:**

PO BOX 17817  
SARASOTA, FL 342760817

**New Principal Place of Business:**

5020 CLARK ROAD  
SUITE 117  
SARASOTA, FL 34233

**Current Mailing Address:**

PO BOX 17817  
SARASOTA, FL 342760817

**New Mailing Address:**

5020 CLARK ROAD  
SUITE 117  
SARASOTA, FL 34233

**FEI 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:**

WESTERFIELD, DIVINA  
5100 OCEAN BLVD.  
SARASOTA, FL 34242    US

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

WESTERFIELD, DIVINA  
5020 CLARK ROAD  
SUITE 117  
SARASOTA, FL 34233 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: DIVINA WESTERFIELD

02/15/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR                      ( ) Delete  
Name: WESTERFIELD, DIVINA  
Address: PO BOX 17817  
City-St-Zip: SARASOTA, FL 342760817

Title: MGR                      ( ) Delete  
Name: WESTERFIELD, ARIANNA  
Address: PO BOX 17817  
City-St-Zip: SARASOTA, FL 342760817

**ADDITIONS/CHANGES:**

Title: MGRM                      (X) Change ( ) Addition  
Name: WESTERFIELD, DIVINA  
Address: PO BOX 17817  
City-St-Zip: SARASOTA, FL 34276

Title: MGRM                      (X) Change ( ) Addition  
Name: WESTERFIELD, ARIANNA  
Address: PO BOX 17817  
City-St-Zip: SARASOTA, FL 342760817

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: DIVINA K. WESTERFIELD

MGRM

02/15/2007

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