2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000027609

Address:

City-St-Zip:

Entity Name: SOUTHWEST FLORIDA CAPITAL INVESTORS, L.L.C.

FILED Oct 06, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4801 ISLAND POND COURT #804 BONITA SPRINGS, FL 34134 US **New Mailing Address: Current Mailing Address:** 4801 ISLAND POND COURT #804 BONITA SPRINGS, FL 34134 US FEI Number: 20-2525740 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) 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: PHILLIPS, LYMAN PHILLIPS, LYMAN PARTNER 4801 ISLAND POND COURT 4801 ISLAND POND COURT #804 #804 BONITA SPRINGS, FL 34134 US BONITA SPRINGS, FL 34134 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: LYMAN PHILLIPS 10/06/2006 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change (X) Addition () Delete JOHNSON, IVER D PARTNER Name: Name: Address: Address: 26211 MIRA WAY City-St-Zip: City-St-Zip: BONITA SPRINGS, FL 34134 Title: Title: () Change (X) Addition () Delete Name: Name: JENSEN, WAYLAND PARTNER Address: Address: 26021 HAMMOCK COURT #101 City-St-Zip: City-St-Zip: BONITA SPRINGS, FL 34134 Title: () Delete Title: () Change (X) Addition Name: WISMAR, JAMES D PARTNER Name: Address: Address: 26231 MIRA WAY City-St-Zip: City-St-Zip: BONITA SPRINGS, FL 34134 Title: () Delete Title: MR () Change (X) Addition HUGHES, WILLIAM PARTNER Name: Name:

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.

Address:

City-St-Zip:

1365 IRONWOOD COURT

DEFIANCE, OH 43512

SIGNATURE: LYMAN PHILLIPS MR 10/06/2006