

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000028974

Entity Name: YCADONO, LLC

FILED
Oct 22, 2008
Secretary of State

Current Principal Place of Business:

9759 ROUNDSTONE CIR
FORT MYERS, FL 33967

New Principal Place of Business:

Current Mailing Address:

9759 ROUNDSTONE CIR
FORT MYERS, FL 33967

New Mailing Address:

FEI Number: 20-2594212 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:

TERESA, YCAZA MGRM
9759 ROUNDSTONE CIR
FORT MYERS, FL 33967 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: TERESA YCAZA

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: YCAZA, TERESA
Address: 9759 ROUNDSTONE CIR
City-St-Zip: FORT MYERS, FL 33967

Title: MGRM () Delete
Name: YCAZA, MARTIN JR.
Address: 5723 SOVETOU ROAD #15
City-St-Zip: FORT MYERS, FL 33908

Title: MGRM () Delete
Name: YCAZA, MAYTEE
Address: 9759 ROUNDSTONE CIR
City-St-Zip: FORT MYERS, FL 33967

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: TERESA YCAZA

MGRM

10/22/2008

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