Entity Name	MENT # L050000	36536		S	28, 2008 08:00 A ecretary of State
rincipal Place 65 JAMES LI RESTVIEW, F		Mailing Address 365 JAMES LEE BLVD. CRESTVIEW, FL 32536			
D	O NOT WRIT	e in this sp	PACE	04242008No Chg-LLC 4. FEI Number 20-2650451 5. Certificate of Status Desired	CR2E083 (12/07)
	6. Name and Address of Curr	ent Registered Agent		I	
FRANKLIN H. WATSON, P.A. 5365 E COUNTY HWY 30A, STE 105 SEAGROVE BEACH, FL 32459			DO NOT WRITE IN THIS SPACE		
the obligatio	named entity submits this statemer ons of registered agent. Signature, typed or printed name of registered a		gistered office or register	•	orida. I am familiar with, and accept
The obligation	ons of registered agent.	yent and title if applicable (NOTE: Re		•	
The obligation	NOWILI FEE IS \$138.75 1, 2008 Fee will be \$538 MANAGING MEM MGM BOLTON, RODNEY L 365 W. JAMES LEE BLVD.	yent and title if applicable (NOTE: Re		when reinstering)	DATE:
The obligation	ons of registered agent. Signature, typed or printed name of registered a NOWILL FEE IS \$138.75 1, 2008 Fee will be \$538 MANAGING MEN MGM BOLTON, RODNEY L	yent and title # applicable (NOTE: Re		when reinstering)	DATE
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