


2006 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 NOV -9 PM 11:14

DOCUMENT # L05000042807 1. Entity Name BRANDON BECKLEY, LLC		
Principal Place of Business 383 DANDELION COURT SPRING HILL, FL 34606-5352 US		Mailing Address 383 DANDELION COURT SPRING HILL, FL 34606-5352 US
2. Principal Place of Business 13242 Lawrence St <small>Suite, Apt. #, etc.</small>	3. Mailing Address 13242 Lawrence St <small>Suite, Apt. #, etc.</small>	
City & State Spring Hill, FL <small>Zip</small> 341009 <small>Country</small> U.S.	City & State Spring Hill, FL <small>Zip</small> 341009 <small>Country</small> US	4. FEI Number 10312006 REIN-LLC CR2E101 (11/05) Applied For <input type="checkbox"/> Not Applicable
6. Name and Address of Current Registered Agent BECKLEY, BRANDON C 383 DANDELION COURT SPRING HILL, FL 34606-5352		7. Name and Address of New Registered Agent <small>Name</small> Brandon C. Beckley <small>Street Address (P.O. Box Number is Not Acceptable)</small> 13242 Lawrence St <small>City</small> Spring Hill <small>FL</small> <small>Zip Code</small> 341009
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Brandon Beckley</u> (NOTE: Registered Agent signature required when reinstating) DATE <u>11/7/06</u>		
FILE NOW!!! FEE IS \$150.00 After January 1, 2007, Fee will be \$200.00		Make check payable to Florida Department of State
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BECKLEY, BRANDON C 383 DANDELION COURT SPRING HILL, FL 346065352 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	MGRM BECKLEY, BRANDON 13242 Lawrence St Spring Hill, FL 341009 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	800091658728 11/09/06--01033--007 **155.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: <u>Brandon Beckley</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		Date <u>11/7/06</u> <small>Daytime Phone #</small>