

# **2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000047685

**FILED**  
**Jul 16, 2007**  
**Secretary of State**

**Entity Name:** SKYLANE, L.L.C.

**Current Principal Place of Business:**

4896 SILVERTHORN COURT  
OLDSMAR, FL 34677

**New Principal Place of Business:**

**Current Mailing Address:**

4896 SILVERTHORN COURT  
OLDSMAR, FL 34677

**New Mailing Address:**

**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:**

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

GASSMAN, ALAN S ESQUIRE  
1245 COURT STREET, SUITE 102  
CLEARWATER, FL 33756 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: ALAN GASSMAN

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: MGR ( ) Change (X) Addition  
Name: SOLA, RICHARD MGR  
Address: 4896 SILVERTHORNE CT  
City-St-Zip: OLDSMAR, FL 34677 63

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: RICHARD SOLA

MGR

07/16/2007

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