2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000052185

Entity Name: USEPPA DUCHESS LLC

FILED Mar 06, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

420 W MARION AVENUE 4200 TAMIAMI TRAIL

PUNTA GORDA, FL 33950 SUITE F

PORT CHARLOTTE, FL 33952

Current Mailing Address: New Mailing Address:

420 W MARION AVENUE 4200 TAMIAMI TRAIL

PUNTA GORDA, FL 33950 SUITE F

PORT CHARLOTTE, FL 33952

FEI Number: 20-2895835 FEI Number Applied For () FEI Number Not Applicable () 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:

GUNDERSON, RANDY DUKE, JANE

420 W MARION AVENUE 4200 TAMIAMI TRAIL SUITE F
PUNTA GORDA, FL 33950 US PORT CHARLOTTE, FL 33952 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: JANE DUKE 03/06/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

IAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: GUNDERSON, RANDY Name: DUKE, JANE

 Address:
 420 W MARION AVENUE
 Address:
 4200 TAMIAMI TRAIL SUITE F

 City-St-Zip:
 PUNTA GORDA, FL 33950
 City-St-Zip:
 PORT CHARLOTTE, FL 33952

Title: MGRM () Delete Title: () Change () Addition

 Name:
 DUKE, STEPHEN L
 Name:

 Address:
 4200 TAMIAMI TRAIL SUITE F
 Address:

 City-St-Zip:
 PORT CHARLOTTE, FL 33952
 City-St-Zip:

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 DUKE, JANE
 Name:

 Address:
 4200 TAMIAMI TRAIL-SUITE F
 Address:

 City-St-Zip:
 PORT CHARLOTTE, FL 33952
 City-St-Zip:

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 GUNDERSON, SHELIA
 Name:

 Address:
 420 W MARION AVENUE
 Address:

 City-St-Zip:
 PUNTA GORDA, FL 33950
 City-St-Zip:

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.

SIGNATURE: JANE DUKE MGRM 03/06/2007