

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000064243

Entity Name: W & M HOLDINGS, LLC

FILED
Feb 14, 2007
Secretary of State

Current Principal Place of Business:

9292 PALM ISLAND CIRCLE
N. FT. MYERS, FL 33903

New Principal Place of Business:

1620 SE 12TH TERRACE
CAPE CORAL, FL 33990

Current Mailing Address:

9292 PALM ISLAND CIRCLE
N. FT. MYERS, FL 33903

New Mailing Address:

1620 SE 12TH TERRACE
CAPE CORAL, FL 33990

FEI Number: 20-3071389 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:

MAYE, SAMUEL
9292 PALM ISLAND CIRCLE
N. FT. MYERS, FL 33903 US

Name and Address of New Registered Agent:

MAYE, SAMUEL
1620 SE 12TH TERRACE
CAPE CORAL, FL 33990 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: SAMUEL MAYE

02/14/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SAMUEL, MAYE E
Address: 9292 PALM ISLAND CIRCLE
City-St-Zip: N. FT. MYERS, FL 33903

Title: MGRM () Delete
Name: LAURA, BARKER J
Address: 9292 PALM ISLAND CIRCLE
City-St-Zip: N. FT. MYERS, FL 33903

Title: MGRM () Delete
Name: WALLACE, KIM R
Address: 1727 SE 39TH TERRACE
City-St-Zip: CAPE CORAL, FL 33904

Title: MGRM () Delete
Name: WALLACE, KAREN L
Address: 1727 SE 39TH TERRACE
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SAMUEL, MAYE E
Address: 1620 SE 12TH TERRACE
City-St-Zip: CAPE CORAL, FL 33990

Title: MGRM (X) Change () Addition
Name: LAURA, BARKER J
Address: 1620 SE 12TH TERRACE
City-St-Zip: CAPE CORAL, FL 33990

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 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: SAMUEL E MAYE

MGR

02/14/2007

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