

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000079048

**FILED**  
**Jan 29, 2007**  
**Secretary of State**

**Entity Name:** STICK IT IN YOUR BUTTON, LLC

**Current Principal Place of Business:**

5424 PACES MILL RD.  
TALLAHASSEE, FL 32309 US

**New Principal Place of Business:**

429 TEAL LANE  
TALLAHASSEE, FL 32308 US

**Current Mailing Address:**

5424 PACES MILL RD.  
TALLAHASSEE, FL 32309 US

**New Mailing Address:**

429 TEAL LANE  
TALLAHASSEE, FL 32308 US

**FEI Number:** 59-3813137 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**  
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:**

NOTTINGHAM, TRAVIS  
5424 PACES MILL RD.  
TALLAHASSEE, FL 32309 US

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

PETERS, KATHRYN  
429 TEAL LANE  
TALLAHASSEE, FL 32308 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: KATHRYN PETERS

01/29/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: NOTTINGHAM, TRAVIS  
Address: 5424 PACES MILL RD.  
City-St-Zip: TALLAHASSEE, FL 32309 US

Title: MGRM ( ) Delete  
Name: PORTER, JERROD  
Address: 627 DART ST.  
City-St-Zip: TALLAHASSEE, FL 32303 US

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

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: NOTTINGHAM, TRAVIS  
Address: 1335 CROSS CREEK CIRCLE  
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: MGRM (X) Change ( ) Addition  
Name: PORTER, JERROD  
Address: 627 DART STREET  
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: MGRM ( ) Change (X) Addition  
Name: PETERS, KATHRYN  
Address: 429 TEAL LANE  
City-St-Zip: TALLAHASSEE, FL 32308 US

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: KATHRYN PETERS

MGRM

01/29/2007

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