

# 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000084987

**FILED**  
**Oct 06, 2006**  
**Secretary of State**

**Entity Name:** SPY SYSTEMS LLC

**Current Principal Place of Business:**

107 LYNDHURST DR.  
LONGWOOD, FL 32779

**New Principal Place of Business:**

945 E. ALTAMONTE DRIVE  
ALTAMONTE SPRINGS, FL 32701

**Current Mailing Address:**

107 LYNDHURST DR.  
LONGWOOD, FL 32779

**New Mailing Address:**

945 E. ALTAMONTE DRIVE  
ALTAMONTE SPRINGS, FL 32701

**FEI Number:** 20-3387066      **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:**

SMITH, PETER  
107 LYNDHURST DR.  
LONGWOOD, FL 32779      US

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

SMITH, PETER  
945 E. ALTAMONTE DRIVE  
ALTAMONTE SPRINGS, FL 32701      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: PETER SMITH

10/06/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: SMITH, PETER  
Address: 107 LYNDHURST DR.  
City-St-Zip: LONGWOOD, FL 32779

Title: MGRM      ( ) Delete  
Name: SMITH, KIMBERLEY  
Address: 107 LYNDHURST DR.  
City-St-Zip: LONGWOOD, FL 32779

**ADDITIONS/CHANGES:**

Title: MGRM      (X) Change ( ) Addition  
Name: SMITH, PETER  
Address: 945 E. ALTAMONTE DRIVE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: MGRM      (X) Change ( ) Addition  
Name: SMITH, KIMBERLEY  
Address: 945 E. ALTAMONTE DRIVE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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: PETER SMITH

MGRM

10/06/2006

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