

# **2006 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000086111

**FILED**  
**Sep 27, 2006**  
**Secretary of State**

**Entity Name:** BAYFRONT PROPERTIES, LLC

**Current Principal Place of Business:**

POST OFFICE BOX 1571  
DESTIN, FL 32540

**New Principal Place of Business:**

POST OFFICE BOX 1571  
SANTA ROSA BEACH, FL 32459

**Current Mailing Address:**

POST OFFICE BOX 1571  
DESTIN, FL 32540

**New Mailing Address:**

POST OFFICE BOX 1571  
SANTA ROSA BEACH, FL 32459

**FEI Number:** 58-1439521      **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:**

KRAEMER, MARY K ESQ  
4475 LEGENDARY DRIVE  
DESTIN, FL 32541 US

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

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: MARY KRAEMER

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: BECK, G. ROBERT  
Address: POST OFFICE BOX 1571  
City-St-Zip: DESTIN, FL 32540

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: BECK, G. ROBERT  
Address: POST OFFICE BOX 1571  
City-St-Zip: SANTA ROSA BEACH, FL 32459

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: G. ROBERT BECK

MR

09/27/2006

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