

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED

08 MAY -7 PM 1:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L05000098161		
1. Entity Name BIG BOUNCE MEDIA, LLC		

Principal Place of Business 324 8TH AVENUE WEST SUITE 103 PALMETTO, FL 34221 US	Mailing Address P.O. BOX 531181 ST PETERSBURG, FL 33747 US
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2. Principal Place of Business - No P.O. Box # 495 7th AVE N	3. Mailing Address 495 7th AVE N
Suite, Apt. #, etc. St. Petersburg, FL	Suite, Apt. #, etc. St. Petersburg, FL
City & State 33701	City & State 33701
Zip 33701	Country USA



11132007 REIN-LLC CR2E101 (1/07)

4. FEI Number 20-3577158	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent ROSENBERG, DAVID H ESQ 6151 LAKE OSPREY DR. SUITE 338 SARASOTA, FL 34240	7. Name and Address of New Registered Agent Name John E. WALTERS, MBA, EA Street Address (P.O. Box Number is Not Acceptable) 1015 DARTMOOR ST. N City St. Petersburg FL Zip Code 33701
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE John E. Walters DATE 11/13/2007

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!! FEE IS \$50.00 After January 1, 2008, Fee will be \$100.00	In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM POWERS, JAMES L JR. P.O. BOX 531181 ST PETERSBURG, FL 33747 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BURNS, TIMOTHY W. 495 7th AVE N St. Petersburg, FL 33701 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HUGGINS, JAMES P.O. BOX 531181 ST PETERSBURG, FL 33747 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DORCAS, DEKIN P.O. BOX 531181 ST PETERSBURG, FL 33747 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	800120973278 03/24/08--01005--009 **205.00 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HENNESSY, STEPHEN P.O. BOX 531181 ST PETERSBURG, FL 33747 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	800120973278 05/14/08--01006--022 **72.50 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JIMENEZ, ROGER G P.O. BOX 531181 ST PETERSBURG, FL 33747 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: [Signature] DATE 11/15/07 DAYTIME PHONE # 7274423169

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE