

# **2009 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000101092

Entity Name: ENERGY VENDING, LLC

**FILED**  
**Sep 10, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

75 N. THOMPSON CREEK ROAD  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

75 THOMPSON CREEK ROAD  
ORMOND BEACH, FL 32174

**Current Mailing Address:**

163 UNIVERSITY CIRCLE  
ORMOND BEACH, FL 32176

**New Mailing Address:**

75 THOMPSON CREEK ROAD  
ORMOND BEACH, FL 32174

FEI Number: 20-3615670

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

MORT, MICHAEL J  
163 UNIVERSITY CIRCLE  
ORMOND BEACH, FL 32176 US

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

MORT, MICHAEL J  
10 FOXHUNTER FLAT  
ORMOND BEACH, FL 32174 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: MICHAEL J. MORT

09/10/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MORT, MICHAEL J  
Address: 163 UNIVERSITY CIRCLE  
City-St-Zip: ORMOND BEACH, FL 32176

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MORT, MICHAEL J  
Address: 10 FOXHUNTER FLAT  
City-St-Zip: ORMOND BEACH, FL 32174

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL J. MORT

MGRM

09/10/2009

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