

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L05000107455					
1. Entity Name SID QW22, LLC					
Principal Place of Business 2780 SOUTH HORSESHOE DRIVE SUITE #2 NAPLES, FL 34104			Mailing Address 2780 SOUTH HORSESHOE DRIVE SUITE #2 NAPLES, FL 34104		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 999 Vanderbilt Beach Road			
Suite, Apt. #, etc.		Suite Apt # etc. Suite 1000			
City & State		City & State Naples, Florida		11042008 REIN-LLC CR2E101 (1/07)	
Zip		Country		4. FEI Number 02-0759120	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent CHANEY, MARK 2780 SOUTH HORSESHOE DRIVE SUITE #2 NAPLES, FL 34104			7. Name and Address of New Registered Agent Name <u>Chaney, Mark</u> Street Address (P.O. Box Number is Not Acceptable) <u>999 Vanderbilt Beach Road Suite 1000</u> City <u>Naples</u> FL Zip Code <u>34018</u>		
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 <u>Mark Chaney</u> Mark Chaney, Managing Member 11/04/08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$138.75 After January 1, 2009, Fee will be \$277.50		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	
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CHANEY, MARK R <input type="checkbox"/> Delete 2780 SOUTH HORSESHOE DRIVE SUITE #2 NAPLES, FL 34104		TITLE NAME STREET ADDRESS CITY-ST-ZIP	999 Vanderbilt Beach Road Suite 1000 <input type="checkbox"/> Change <input type="checkbox"/> Addition Naples, Florida 34018 Collier Florida	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	800137679778 <input type="checkbox"/> Change <input type="checkbox"/> Addition 11/05/08--01043--014 **138.75	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	2008 NOV 12 P 2:22 <input type="checkbox"/> Change <input type="checkbox"/> Addition SECRETARY OF STATE TALLAHASSEE, FLORIDA	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: <u>Mark Chaney</u> Mark Chaney, Managing Member			11/04/08 239-435-9220		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			<small>Date Daytime Phone #</small>		



Henderson|Franklin
ATTORNEYS AT LAW

Bonita Bay Executive Center I
3451 Bonita Bay Boulevard, Suite 206
Bonita Springs, FL 34134
Tel: 239.344.1100 • Fax: 239.498.6225 • www.henlaw.com

Fort Myers • Sanibel

Reply to
Beverly Belleau, FRP
Paralegal
Direct Fax Number 239.344.1572
Direct Dial Number 239.344.1373
E-Mail: bev.belleau@henlaw.com

November 4, 2008

VIA FEDERAL EXPRESS

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Reinstatement of Limited Liability Company
SID QW22, LLC Document # L05000107455

Dear Agent:

Kindly find attached our Trust Account Check Number 108667, in the amount of \$138.75 to reinstate without penalty, made payable to the Florida Department of State, representing the reinstatement of SID QW22, LLC, Document # L05000107455. Our client had not received a notice due to the change of his mailing address.

Sincerely,

Beverly Belleau, FRP
Paralegal

BB/