2008 LIMITED LIABILITY COMPANY REINSTATEMENT

REINSTATEMENT										
DOCUMENT # L05000107456 1. Entity Name SID QW21, LLC								a. 1		
Principal Place of 2780 SOUTH HO SUITE #2 NAPLES, FL 34	ORSESHOE DRIVE	278 (SUIT	Mailing Address 2780 SOUTH HORSESHOE DRI VE SUITE #2 NAPLES, FL 34104				! 89 E 1 88 <u>84 </u> 80	11 8 1 1181 88 1 1 98 1	 	IR ! III 11
· · · · · · · · · · · · · · · · · · ·	e of Business - No P.O. Box		3. Mailinn Address 999 Vanderbilt Beach Road							
Suite, Apt. #, e	etc.	Suit	Suite, Apt. #. etc. Suite 1000			11042008	REIN-LLC	CR2E1	01 (1/07)	
City & State		City	City & State Naples, Florida			4. FEI Number 02-075				plied For t Applicable
Zip				Coun	try Collier	5. Certificate	of Status Desired		55.00 Add ee Required	
	6. Name and Address of C	urrent Register	ed Agent	Name Cha		Address of New F	Registered A	gent		
	ARK I HORSESHOE DRIVI	E				aney, Mark (P.O. Box Numb	O. Box Number is Not Acceptable)			
SUITE #2 NAPLES, FL	34104		_			999 Vanderbilt Beach Road Suite 1000				
						Naples FL Zip Coda 34018				
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 Mark Chaney, Managing Member 11/04/08 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent alignature required when reinstating) DATE										
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.		MEMBERS/MAN	· · · · · · · · · · · · · · · · · · ·	10.			ADDITIONS	CHANGES		
NAME CI STREET ADDRESS 27						☐ Change ☐ Addition 999 Vanderbilt Beach Road Suite 1000 Naples, Florida 34018 Collier Florida				
TITLE NAME STREET ADDRESS CITY-ST-ZIP						300137679689 Addition 11/05/0801043013 **138.75				
TITLE NAME STREET ADDRESS CITY-ST-ZIP						ALCRE Addition Change Addition Change Addition ACCRETATION ACCRETA				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					1		ARY OF S	-2 P	☐ Change	Addition
NAME STREET ADDRESST	EINSTATFMENT	200	Delete				ORIDA	2 24	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete						Change	☐ Addition
11. I hereby certify that the information supplied with this filling 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: Mark Chaney, Managing Member 11/4/08 239-435-9220 SIGNATURE AND TYPED OR PRINTED NAME OF SKINING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Date Date										



Bonita Bay Executive Center t 3451 Bonita Bay Boulevard, Suite 206 Bonita Springs, FL 34134 Tel: 239.344.1100 • Fax: 239.498.6225 • www.herliaw.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 QW21, LLC Document # L05000107456

Dear Agent:

Kindly find attached our Trust Account Check Number 108666, in the amount of \$138.75 to reinstate without penalty, made payable to the Florida Department of State, representing the reinstatement of SID QW21, LLC, Document # L05000107456 Our client had not received a notice due to the change of his mailing address.

Sincerely,

Beverly Belleau, FRP

Paralegal

BB/