

# **2006 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000110231

Entity Name: SEASHORE MEDIA, LLC

**FILED**  
**Oct 10, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

253 INDIAN ROCKS ROAD S.  
BELLEAIR BLUFFS, FL 33770

**New Principal Place of Business:**

7147 BOCA GROVE PLACE  
102  
BRADENTON, FL 34202 US

**Current Mailing Address:**

253 INDIAN ROCKS ROAD S.  
BELLEAIR BLUFFS, FL 33770

**New Mailing Address:**

7147 BOCA GROVE PLACE  
102  
BRADENTON, FL 34202 US

FEI Number: 20-3793093      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:**

LIDDICK, BETTY I  
253 INDIAN ROCKS ROAD S.  
BELLEAIR BLUFFS, FL 33770 US

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

LIDDICK, BETTY I  
7147 BOCA GROVE PLACE  
102  
BRADENTON, FL 34202 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: BETTY I. LIDDICK

10/10/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MM ( ) Change (X) Addition  
Name: LIDDICK, BETTY I  
Address: 7147 BOCA GROVE PLACE, #102  
City-St-Zip: BRADENTON, FL 34202 US

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: BETTY I. LIDDICK

MM

10/10/2006

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