

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000120136

**FILED**  
**Jun 05, 2008**  
**Secretary of State**

**Entity Name:** CLEARWATER INVESTMENT GROUP, LLC

**Current Principal Place of Business:**

17365 N. MESA DRIVE  
PAUMA VALLEY, CA 92061 US

**New Principal Place of Business:**

**Current Mailing Address:**

17365 N. MESA DRIVE  
PAUMA VALLEY, CA 92061 US

**New Mailing Address:**

P. O. BOX 220  
PAUMA VALLEY, CA 92061 US

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**  
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:**

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

HAAS, LEE L  
19321-C U.S. HWY 19 N  
STE. 401  
CLEARWATER, FL 33764 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: LEE L. HAAS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: KRAWWEZ, MAXWELL  
Address: 17365 N. MESA DRIVE  
City-St-Zip: PAUMA VALLEY, CA 92061

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Delete  
Name: WINN, JAMIE  
Address: 17365 N. MESA DRIVE  
City-St-Zip: PAUMA VALLEY, CA 92061

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MAXWELL KRAWWEZ

MGRM

06/05/2008

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