2008 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 02, 2008
Secretary of State

DOCUMENT# L05000120493

Entity Name: MANGO, LLC

Current Principal Place of Business:

3901 DIXIE HWY. NE, UNIT 501
PALM BAY, FL 32905

New Principal Place of Business:

Current Mailing Address:

3901 DIXIE HWY. NE, UNIT 501
PALM BAY, FL 32905

New Mailing Address:

FEI Number: 20-3965801 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GENOW, DAVID A
3901 DIXIE HWY. NE, UNIT 501
PALM BAY, FL 32905 US

Name and Address of New Registered Agent:

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: DAVID A GENOW

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: GENOW, DAVID A
Address: 3901 DIXIE HWY. NE, UNIT 501
City-St-Zip: PALM BAY, FL 32905 US

Title: MGRM ( ) Delete
Name: GENOW, DELORES K
Address: 3901 DIXIE HWY. NE, UNIT 501
City-St-Zip: PALM BAY, FL 32905 US

Title: MGRM ( ) Delete
Name: MANUS, RICHARD
Address: 3901 DIXIE HWY. NE, UNIT 501
City-St-Zip: PALM BAY, FL 32905 US

ADDITIONS/CHANGES:

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

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

Title: MGRM (X) Change ( ) Addition
Name: MANUS, RICHARD
Address: 9631 VERGENNES
City-St-Zip: LOWELL, MI 49331 US

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: DAVID A GENOW MGRM 10/02/2008

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