2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000006787

Entity Name: MATS UNLIMITED LLC

FILED Nov 04, 2008 Secretary of State

Current P	rincipal Place of Business:	New Principal Place of Bu	usiness:
2249 HWY LAKE WAI	′ 60 E LES, FL 33898		
Current M	lailing Address:	New Mailing Address:	
2249 HWY LAKE WAI	′60 E LES, FL 33898		
	: 20-4280389 FEI Number Applied For (ice with s. 607.193(2)(b), F.S., the limited liabilit		ertificate of Status Desired()
Name and	l Address of Current Registered Agen	t: Name and Address of Nev	w Registered Agent:
	/ 60 E LES, FL 33898 US		
	named entity submits this statement for e of Florida.	the purpose of changing its registered office	ce or registered agent, or both
SIGNATUR	RE: DAVID E BOND		
	Electronic Signature of Registered	d Agent	Date
MANAGING	MEMBERS/MANAGERS:	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGR () Delete LEARY, REBBECA E 2249 HWY 60 E LAKE WALES, FL 33898	Title: () Ch Name: Address: City-St-Zip:	nange()Addition
Title: Name: Address: City-St-Zip:	MGR () Delete BOND, DAVID E 2249 HWY 60 E LAKE WALES, FL 33898	Title: () Cl Name: Address: City-St-Zip:	nange()Addition
Title: Name: Address: City-St-Zip:	MGR () Delete LEARY, ROBERT E JR 2279 HWY 60 E LAKE WALES, FL 33898	Title: () Ch Name: Address: City-St-Zip:	nange()Addition
Title: Name: Address: City-St-Zip:	MGR () Delete BOND, AMANDA D 2249 HWY 60 E LAKELAND, FL 33898	Title: () Cl Name: Address: City-St-Zip:	nange ()Addition

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 E BOND MGR 11/04/2008