

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000023569

Entity Name: GATOR CONCIERGE, LLC

FILED
Mar 07, 2008
Secretary of State

Current Principal Place of Business:

203 N.W. 2ND AVE
MICANOPY, FL 32667 US

New Principal Place of Business:

Current Mailing Address:

203 N.W. 2ND AVENUE
MICANOPY, FL 32667 US

New Mailing Address:

FEI Number: 20-4954041 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:

SELLERS, DAVID H
143 DEPOT ROAD
HAWTHORNE,, FL 32640 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 H. SELLERS

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LAWRENCE, LEANNE
Address: 203 N.W. 2ND AVENUE
City-St-Zip: MICANOPY, FL 32667 US

Title: MGR () Delete
Name: RICHARDS, WENDY J
Address: 986 MOUNTAIN OAK ROAD, #4081
City-St-Zip: ELLIJAY, GA 30536 US

Title: MGR () Delete
Name: HAYES, PAMELA J
Address: 2633 SAN GABRIEL
City-St-Zip: HOWIE IN THE HILLS, FL 34737 US

Title: MGR () Delete
Name: SELLERS, DAVID H
Address: 143 DEPOT ROAD
City-St-Zip: HAWTHORNE, FL 32640 US

ADDITIONS/CHANGES:

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

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

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

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: DAVID H. SELLERS

MGR

03/07/2008

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