

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000025415

Entity Name: DUNN & MAHLER L.L.C.

FILED  
Sep 25, 2007  
Secretary of State

**Current Principal Place of Business:**

10215 SOUTH EAST LENNARD RD.  
PORT ST. LUCIE, FL 34952 US

**New Principal Place of Business:**

**Current Mailing Address:**

10215 SOUTH EAST LENNARD RD.  
PORT ST. LUCIE, FL 34952 US

**New Mailing Address:**

FEI Number: 65-1270139

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MAHLER, JOSHUA  
1164 SW HUNNICUT AVE  
PORT ST. LUCIE, FL 34953 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: JOSHUA MAHLER

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: DUNN, MICHAEL L  
Address: 785 SOUTH EAST ABLETT LANE  
City-St-Zip: PORT ST. LUCIE, FL 34984 US

Title: MGRM ( ) Delete  
Name: MAHLER, JOSHUA  
Address: 1164 SOUTH WEST HUNNICUT AVE  
City-St-Zip: PORT ST. LUCIE, FL 34953 US

**ADDITIONS/CHANGES:**

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: MICHAEL DUNN

MNGR

09/25/2007

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