

# **2008 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000030668

Entity Name: ARTEX LLC

**FILED**  
**Oct 12, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

5318 MALALUKA COURT  
CAPE CORAL, FL 33904

**New Principal Place of Business:**

2937 SW 8TH PLACE  
CAPE CORAL, FL 33914

**Current Mailing Address:**

5318 MALALUKA COURT  
CAPE CORAL, FL 33904

**New Mailing Address:**

2937 SW 8TH PLACE  
CAPE CORAL, FL 33914

FEI Number: 20-0270993      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:**

GARDNER, DAVID M  
5318 MALALUKA COURT  
CAPE CORAL, FL 33904      US

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

GARDNER, DAVID M  
2937 SW 8TH PLACE  
CAPE CORAL, FL 33914      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: DAVID M. GARDNER

10/12/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: GARDNER, DAVID M  
Address: 5318 MALALUKA COURT  
City-St-Zip: CAPE CORAL, FL 33904

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change ( ) Addition  
Name: GARDNER, DAVID M  
Address: 2937 SW 8TH PLACE  
City-St-Zip: CAPE CORAL, FL 33914

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 M. GARDNER

MGR

10/12/2008

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