

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000033658

Entity Name: DAN MYERS, LLC

FILED
Jan 23, 2009
Secretary of State

Current Principal Place of Business:

1006 E. PEBBLE BEACH CR.
WINTER SPRINGS, FL 32708 US

New Principal Place of Business:

74 HEATHER TRACE DRIVE
BOYNTON BEACH, FL 33436 US

Current Mailing Address:

1006 E. PEBBLE BEACH CR.
WINTER SPRINGS, FL 32708 US

New Mailing Address:

74 HEATHER TRACE DRIVE
BOYNTON BEACH, FL 33436 US

FEI Number: 20-4655242 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

MYERS, DANIEL A
1006 E. PEBBLE BEACH CR.
WINTER SPRINGS, FL 32708 US

Name and Address of New Registered Agent:

MYERS, DANIEL A
74 HEATHER TRACE DRIVE
BOYNTON BEACH, FL 33436 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: DANIEL A. MYERS

01/23/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MYERS, DANIEL A
Address: 1006 E. PEBBLE BEACH CR.
City-St-Zip: WINTER SPRINGS, FL 32708 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MYERS, DANIEL A
Address: 74 HEATHER TRACE DRIVE
City-St-Zip: BOYNTON BEACH, FL 33436 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: DANIEL A. MYERS

PRES

01/23/2009

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