2008 LIMITED LIABILITY COMPANY REINSTATEMENT

REINSTATEMENT								F	y			
DOCUMENT # L06000034722 1. Entity Name NORWOOD PUBLIC RELATIONS & PRODUCTIONS, LLC							ų	08 NOV 15	ED PH 3:	-		
Principal Place of Business 2025 OAK STREET SARASOTA, FL 34237			Mailing Address P.O. BOX 546 SARASOTA, FL 34230			The state of the s						
205 6	<u>Solden</u>	ess No P.O. Box #	3. Mailing Address									
Suite, Apt. #, etc. # 3이			Suite, Apt. #, etc.				11032008	REIN-LLC	CR2E101	(1/07)		
Sarasota, FL			City & State				4. FEI Number 20-4622			\vdash	Applicable	
34236 Country USA			Zip Country				5. Certificate of Status Desired See Required Fee Required					
		and Address of Current R	egistered Agent				7. Name and	Address of New F	Registered Agen	it		
NORWOOD, JENNA 2025 OAK STREET SARASOTA, FL 34237						Nampelo ecca J. Proctor, Esq. Street Address (P.O. Box Number is Not Acceptable) 1990 Main St. Ste 700 City arc syland FL Zip Code 310						
8. 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. I am familiar with, and accept the obligations of registered agent.												
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OATE												
FILE NOWI!! FEE IS \$138.75 After January 1, 2009, Fee will be \$277.50 In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Make check payable to Florida Department of State												
9.		MANAGING MEMBER	I RS/MANAGERS	10.			L	ADDITIONS	/CHANGES			
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Where W. M. W.												
SIGNATURE: JONES 1/3/08 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Dato Daylimo Phono #												

Law Offices of DUNLAP & MORAN, P.A.

Post Office Box 3948, Sarasota, Florida 34230-3948
Telephone 941-366-0115 Facsimile 941-365-4660 www.dunlapmoran.com

November 12, 2008

8532-1

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: NORWOOD PUBLIC RELATIONS & PRODUCTIONS, LLC

Document No. L06000034722

Dear Sir/Madam:

Enclosed is the 2008 Limited Liability Company Reinstatement in connection with the above-referenced Limited Liability Company. Also, please find **enclosed** a check in the amount of \$138.75, representing payment of your fee for same.

I would appreciate your filing the enclosed Report and forward to me confirmation of said filing. I have **enclosed** a self-addressed envelope for returning said confirmation.

If you have any questions, please do not hesitate to contact me.

Very truly yours,

DUNLAP & MORAN, P.A.

RJP:neb/8532-1/ltr DIVCORP 08AR

Enclosures

cc: Jenna Norwood