2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000036320

Entity Name: AQUASCAPE CREATIONS LLC

FILED Sep 24, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

17477 MEADOW LAKE CIRCLE 17477 MEADOW LAKE CIRCLE

FT. MYERS, FL 33912 FT. MYERS, FL 33967

Current Mailing Address: New Mailing Address:

17477 MEADOW LAKE CIRCLE 17477 MEADOW LAKE CIRCLE

FT. MYERS, FL 33912 FT. MYERS, FL 33967

FEI Number: 20-4851511 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LAINE, SCOTT K
17477 MEADOW LAKE CIRCLE
LAINE, SCOTT K
17477 MEADOW LAKE CIRCLE

17477 MEADOW LAKE CIRCLE 17477 MEADOW LAKE CIRCLE FT. MYERS, FL, FL 33912 US FT. MYERS, FL 33967 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: SCOTT K. LAINE 09/24/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGRM (X) Change () Addition

Name: LAINE, SCOTT K
Address: 17477 MEADOW LAKE CIRCLE

Name: LAINE, SCOTT K
Address: 17477 MEADOW LAKE CIRCLE

City-St-Zip: FT. MYERS, FL 33912 City-St-Zip: FT. MYERS, FL 33967

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 DEFRANCESCO, CHRISTOPHER
 Name:

 Address:
 17557 DEQUESNE RD.
 Address:

 City-St-Zip:
 FT. MYERS, FL 33912
 City-St-Zip:

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 RAGGETT, ROGER
 Name:

 Address:
 4530 RANDAG DR.
 Address:

 City-St-Zip:
 N. FT. MYERS, FL 33903
 City-St-Zip:

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 LAINE, KIM
 Name:

 Address:
 17477 MEADOW LAKE CIRCLE
 Address:

 City-St-Zip:
 FT. MYERS, FL 33912
 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: SCOTT K. LAINE MGRM 09/24/2007