

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000067789

Entity Name: INMAN D, L.L.C.

FILED
Oct 29, 2008
Secretary of State

Current Principal Place of Business:

4611 SOUTH UNIVERSITY DR., SUITE 162
DAVIE, FL 33328

New Principal Place of Business:

Current Mailing Address:

4611 SOUTH UNIVERSITY DR., SUITE 162
DAVIE, FL 33328

New Mailing Address:

FEI Number: 20-5236476 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:

Name and Address of New Registered Agent:

SIMONS, DAVID J ESQ.
JEROME A. SIMONS, P.A.
3864 SHERIDAN STREET
HOLLYWOOD, FL 33021 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 SIMONS

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: INMAN, DAVID TRUSTEE
Address: 4611 SOUTH UNIVERSITY DR., SUITE 162
City-St-Zip: DAVIE, FL 33328

Title: MGR () Delete
Name: GILCHRIST, COLLEEN TRUSTEE
Address: 4611 SOUTH UNIVERSITY DR., SUITE 162
City-St-Zip: DAVIE, FL 33328

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: INMAN, COLLEEN TRUSTEE
Address: 4611 SOUTH UNIVERSITY DR., SUITE 162
City-St-Zip: DAVIE, FL 33328

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: DAVE INMAN

PRES

10/29/2008

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