

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000068495

FILED  
Nov 02, 2007  
Secretary of State

Entity Name: LAMBKIN LIMITED COMPANY

## Current Principal Place of Business:

22 N. GRANNIS AVE  
TITUSVILLE, FL 32796

## New Principal Place of Business:

3770 CURTIS BLVD  
#708  
COCOA, FL 32927

## Current Mailing Address:

22 N. GRANNIS AVE  
TITUSVILLE, FL 32796

## New Mailing Address:

3770 CURTIS BLVD  
#708  
COCOA, FL 32927

FEI Number: 20-5178986      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:

LAMB, ALBERT T  
22 N. GRANNIS AVE  
TITUSVILLE, FL 32796      US

## Name and Address of New Registered Agent:

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: ALBERT LAMB

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: LAMB, ALBERT T THOMAS  
Address: 22 N GRANNIS AVE  
City-St-Zip: TITUSVILLE, FL 32796 TH

Title: MGR ( ) Delete  
Name: LAKIN, MIKE  
Address: 2475 ALEXANDER DRIVE  
City-St-Zip: TITUSVILLE, FL 32780 TH

Title: MGRM ( ) Delete  
Name: LAMB, DENISE A  
Address: 22 N GRANNIS AVE  
City-St-Zip: TITUSVILLE, FL 32796 TH

Title: MGRM ( ) Delete  
Name: LAKIN, TARA  
Address: 2475 ALEXANDER DRIVE  
City-St-Zip: TITUSVILLE, FL 32780 TH

## ADDITIONS/CHANGES:

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

Title: MGR (X) Change ( ) Addition  
Name: LAKIN, WILLIAM M  
Address: 3705 MIRIAM DR  
City-St-Zip: TITUSVILLE, FL 32796 TH

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

Title: MGRM (X) Change ( ) Addition  
Name: LAKIN, TARA L  
Address: 3705 MIRIAM DR  
City-St-Zip: TITUSVILLE, FL 32796 TH

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: WILLIAM LAKIN

MGR

11/02/2007

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