

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000078819

FILED
Oct 14, 2009
Secretary of State

Entity Name: MICHAEL MUNSHOWER, LLC

Current Principal Place of Business:

10801 MEADOWLARK COVE DR.
FT. MYERS, FL 33908 US

New Principal Place of Business:

Current Mailing Address:

10801 MEADOWLARK COVE DR.
FT. MYERS, FL 33908 US

New Mailing Address:

FEI Number: 74-3186842 **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:

MUNSHOWER, MICHAEL J
10801 MEADOWLARK COVE DR.
FT. MYERS, FL 33908 US

Name and Address of New Registered Agent:

MUNSHOWER, MICHAEL J
10897 MEADOWLARK COVE DR.
FT. MYERS, FL 33908 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: MICHAEL MUNSHOWER

10/14/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MR () Delete
Name: MUNSHOWER, MICHAEL J OWNER
Address: 10801 MEADOWLARK COVE DR.
City-St-Zip: FORT MYERS, FL 33908 US

ADDITIONS/CHANGES:

Title: MR (X) Change () Addition
Name: MUNSHOWER, MICHAEL J OWNER
Address: 10897 MEADOWLARK COVE DR.
City-St-Zip: FORT MYERS, FL 33908 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: MICHAEL MUNSHOWER

MR

10/14/2009

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