

# **2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000098311

**FILED**  
**Oct 05, 2007**  
**Secretary of State**

**Entity Name:** DELTA ASSOCIATES LLC

**Current Principal Place of Business:**

5725 LAWTON DRIVE  
SARASOTA, FL 34233

**New Principal Place of Business:**

**Current Mailing Address:**

5725 LAWTON DRIVE  
SARASOTA, FL 34233

**New Mailing Address:**

POST OFFICE BOX 19834  
SARASOTA, FL 34276

FEI Number: 20-5818103      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

BERRY, KENYA  
5725 LAWTON DRIVE  
SARASOTA, FL 34233      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: KENYA BERRY

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: BERRY, KENYA  
Address: 5725 LAWTON DRIVE  
City-St-Zip: SARASOTA, FL 34233

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
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: KENYA BERRY

OWER

10/05/2007

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