

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000102842

FILED
Oct 11, 2007
Secretary of State

Entity Name: COASTAL HEADSETS PLUS, LLC

Current Principal Place of Business:

8507 ALTON AVENUE
JACKSONVILLE, FL 32211

New Principal Place of Business:

Current Mailing Address:

8507 ALTON AVENUE
JACKSONVILLE, FL 32211

New Mailing Address:

FEI Number: 41-2217796 **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:

BOHANAN, MARCUS WAYNE
8507 ALTON AVENUE
JACKSONVILLE, FL 32211 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: BART BROOKSHIRE

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BROOKSHIRE, BART CHADWICK
Address: 11063 WHISTLEWOOD COURT
City-St-Zip: JACKSONVILLE, FL 32225

Title: MGRM () Delete
Name: BOHANAN, MARCUS WAYNE
Address: 11959 ROYAL FERN LANE
City-St-Zip: JACKSONVILLE, FL 32223

ADDITIONS/CHANGES:

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

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: BART BROOKSHIRE

PRES

10/11/2007

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