2007 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 11, 2007
Secretary of State

DOCUMENT# L06000103524

Entity Name: WEI, L.L.C.

Current Principal Place of Business:

241 RUBY AVE.
KISSIMMEE, FL 34741 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 420639
KISSIMMEE, FL 34742

New Mailing Address:

FEI Number: 20-5760609 **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:

WEATHERFORD, WILLIAM P JR
1150 LOUISIANA AVENUE
SUITE 4
WINTER PARK, FL 32789 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: WILLIAM WEATHERFORD, JR.
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: ASKEY, JAMES F PE
Address: 1100 N. MAIN STREET, SUITE A
City-St-Zip: KISSIMMEE, FL 34744 US

Title: MGR ( ) Delete
Name: HUGHEY, DONALD L JR
Address: 1100 N. MAIN STREET, SUITE A
City-St-Zip: KISSIMMEE, FL 34744 US

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: ASKEY, JAMES F PE
Address: 241 RUBY AVENUE
City-St-Zip: KISSIMMEE, FL 34741 US

Title: MGR (X) Change ( ) Addition
Name: HUGHEY, DONALD L JR
Address: 241 RUBY AVENUE
City-St-Zip: KISSIMMEE, FL 34741 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: JAMES F. ASKEY MGR 10/11/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date