2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 09, 2009
Secretary of State

DOCUMENT# L06000104156

Entity Name: 3 D INVESTMENT GROUP LLC

Current Principal Place of Business:

109 EVERSOLE AVE
LAKE PLACID, FL 338522

New Principal Place of Business:

Current Mailing Address:

PO BOX 2049
LAKE PLACID, FL 33862

New Mailing Address:

FEI Number: 20-5775583 **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:

ROBINSON, DERRICK J
109 EVERSOLE AVE
LAKE PLACID, FL 33852 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: DERRICK ROBINSON

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title:	MGRM	( ) Delete
Name:	ROBINSON, DERRICK J	
Address:	PO BOX 2049	
City-St-Zip:	LAKE PLACID, FL 33862	
Title:	MGRM	( ) Delete
Name:	ROBINSON, TERESA M	
Address:	PO BOX 2049	
City-St-Zip:	LAKE PLACID, FL 33862	
Title:	MGRM	( ) Delete
Name:	STERLING, WAYNE L	
Address:	2762 GROOVERS LAKE POINT	
City-St-Zip:	LITHIA SPRINGS, GA 30122	
Title:	MGRM	( ) Delete
Name:	ROBINSON, DERRENTIAN J SR.	
Address:	PO BOX 2049	
City-St-Zip:	LAKE PLACID, FL 33862	
Title:	MGRM	( ) Delete
Name:	ROBINSON, TOEY L	
Address:	11 LAKE VIEW COURT	
City-St-Zip:	LAKE PLACID, FL 33852	
Title:	MGRM	( ) Delete
Name:	ROBINSON, TOYECA M	
Address:	2762 GROOVERS LAKE COURT	
City-St-Zip:	LITHIA SPRINGS, GA 30122	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: ROBINSON DERRICK MGRM 10/09/2009

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