

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000110045

Entity Name: GRATOOR INVESTMENTS, LLC

FILED  
Oct 02, 2007  
Secretary of State

**Current Principal Place of Business:**

3 SUMMIT LANE  
SAFETY HARBOR, FL 34695

**New Principal Place of Business:**

**Current Mailing Address:**

3 SUMMIT LANE  
SAFETY HARBOR, FL 34695

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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:**

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

**Name and Address of New Registered Agent:**

VOORHEES, SANDRA  
3 SUMMIT LN  
SAFETY HARBOR, FL 34695 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: SANDRA VOORHEES

10/02/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: VOORHEES, KYLE  
Address: 3 SUMMIT LANE  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: MGR ( ) Delete  
Name: D'AMICO, KENNETH GRAHAM  
Address: 3 SUMMIT LANE  
City-St-Zip: SAFETY HARBOR, FL 34695

**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: KYLE VOORHEES

MGR

10/02/2007

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