

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000110286

FILED
Oct 15, 2007
Secretary of State

Entity Name: JACO BEACH LAND DEVELOPMENT, LLC

Current Principal Place of Business:

13690 BRYNWOOD LANE
FORT MYERS, FL 33912

New Principal Place of Business:

9552 VIA LAGO WAY
FORT MYERS, FL 33912

Current Mailing Address:

13690 BRYNWOOD LANE
FORT MYERS, FL 33912

New Mailing Address:

9552 VIA LAGO WAY
FORT MYERS, FL 33912

FEI Number: 20-5883401 **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:

KYLE, KEVIN A
1380 ROYAL PALM SQUARE BOULEVARD
FORT MYERS, FL 33919 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: MICHAEL MATTA

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: FISHER, BARRY
Address: 13690 BRYNWOOD LANE
City-St-Zip: FORT MYERS, FL 33912

Title: MGR (X) Delete
Name: MATTA, MICHAEL
Address: 13690 BRYNWOOD LANE
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MATTA, MICHAEL
Address: 9552 VIA LAGO WAY
City-St-Zip: FORT MYERS, FL 33912

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: MICHAEL MATTA

MGR

10/15/2007

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