

# **2008 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000119921

**FILED**  
**Nov 08, 2008**  
**Secretary of State**

**Entity Name:** OLIVE ROAD INVESTMENTS, LLC

**Current Principal Place of Business:**

2218 EAST OLIVE ROAD  
PENSACOLA, FL 32514

**New Principal Place of Business:**

301 SWIFT CREEK DR  
CANTONMENT, FL 32533

**Current Mailing Address:**

2218 EAST OLIVE ROAD  
PENSACOLA, FL 32514

**New Mailing Address:**

301 SWIFT CREEK DR  
CANTONMENT, FL 32533

**FEI Number:** 56-2643330      **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:**

SMITH, BILLY R JR  
118 COUNTRI LN  
CANTONMENT, FL 32533      US

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

HEATON, LISA  
301 SWIFT CREEK DR  
CANTONMENT, FL 32533      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: LISA HEATON

11/08/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title:      OWNE      ( ) Delete  
Name:      SMITH, BILLY R JR  
Address:      118 COUNTRI LN  
City-St-Zip:      CANTONMENT, FL 32533 US

**ADDITIONS/CHANGES:**

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: BILLY R SMITH JR

OWNE

11/08/2008

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