

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000001051

Entity Name: BRAILLE LLC

FILED  
Oct 06, 2008  
Secretary of State

## Current Principal Place of Business:

4553 MARRIOTTI CT., UNIT 101  
SARASOTA, FL 34233

## New Principal Place of Business:

4545 MARRIOTTI CT., UNIT N  
SARASOTA, FL 34233

## Current Mailing Address:

4553 MARRIOTTI CT., UNIT 101  
SARASOTA, FL 34233

## New Mailing Address:

4545 MARRIOTTI CT., UNIT N  
SARASOTA, FL 34233

FEI Number: FEI Number Applied For (X) 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:

BRAILLE LLC  
2642 NANCY ST  
SARASOTA, FL 34237 US

## Name and Address of New Registered Agent:

FULLER, SAMUEL B  
4545 MARRIOTTI CT UNIT N  
SARASOTA, FL 34233 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: SAMUEL FULLER

10/06/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: FULLER, SAMUEL B  
Address: 2642 NANCY ST  
City-St-Zip: SARASOTA, FL 34237

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: FULLER, SAMUEL B  
Address: 4545 MARRIOTTI CT UNIT N  
City-St-Zip: SARASOTA, FL 34233

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: SAMUEL FULLER

MGRM

10/06/2008

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