

# **2009 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000005121

Entity Name: SOLEIL-DOLPHIN, L.L.C.

**FILED**  
**May 28, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

320 BEACH FRONT TRAIL  
11 WALTON DUNES  
SANTA ROSA BEACH, FL 32459

**New Principal Place of Business:**

**Current Mailing Address:**

320 BEACH FRONT TRAIL  
11 WALTON DUNES  
SANTA ROSA BEACH, FL 32459

**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:**

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

NINA W. CHASE, L.C.  
174 WATERCOLOR WAY  
#165  
SEAGROVE BEACH, FL 32459 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: CORINNA SOUMERAI

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: SOUMERAI, CORINNA  
Address: 320 BEACH FRONT TRAIL - 11 WALTON DUNES  
City-St-Zip: SANTA ROSA BEACH, FL 32459

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: CORINNA SOUMERAI

MS.

05/28/2009

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