2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Dec 15, 2009
Secretary of State

DOCUMENT# L07000014023

Entity Name: GOLF ACCESSORIES OF NORTH FLORIDA LLC

Current Principal Place of Business:

4314 GADSDEN COURT
JACKSONVILLE, FL 32207 US

New Principal Place of Business:

2205 ST. JOHNS BLUFF
JACKSONVILLE, FL 32246 US

Current Mailing Address:

4314 GADSDEN COURT
JACKSONVILLE, FL 32207 US

New Mailing Address:

2205 ST. JOHNS BLUFF
JACKSONVILLE, FL 32246 US

FEI Number: 20-8418377 **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:

KIRCHHOFF, DOUGLAS C
4314 GADSDEN COURT
JACKSONVILLE, FL 32207 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: DOUGLAS KIRCHHOFF

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: KIRCHHOFF, DOUGLAS C
Address: 4314 GADSDEN COURT
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: MGR ( ) Delete
Name: KIRCHHOFF, LAURA A
Address: 4314 GADSDEN COURT
City-St-Zip: JACKSONVILLE, FL 32207 US

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: DOUG KIRCHHOFF MGR 12/15/2009

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