

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000018620

Entity Name: MELISSA CONRAD, P.L.

FILED  
Mar 22, 2009  
Secretary of State

**Current Principal Place of Business:**

MELISSA CONRAD, P.L.  
1409 SW VICUNA LANE  
PORT ST. LUCIE, FL 34953

**New Principal Place of Business:**

**Current Mailing Address:**

MELISSA CONRAD, P.L.  
1409 SW VICUNA LANE  
PORT ST. LUCIE, FL 34953

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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:**

CORPORATE CREATIONS NETWORK, INC.  
11380 PROSPERITY FARMS RD #221E  
PALM BEACH GARDENS, FL 33410 US

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

CONRAD, DANA  
1409 SW VICUNA LANE  
PORT SAINT LUCIE, FL 34953 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: DANA CONRAD

03/22/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: CONRAD, MELISSA  
Address: 1409 SW VICUNA LANE  
City-St-Zip: PORT ST. LUCIE, FL 34953

**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: MELISSA CONRAD

MGR

03/22/2009

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