

# **2008 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000027891

**FILED**  
**Oct 16, 2008**  
**Secretary of State**

**Entity Name:** NORTHERN TOUCH GOLF, LLC

**Current Principal Place of Business:**

6703 DRYDEN CT.  
BOYNTON BEACH, FL 33436

**New Principal Place of Business:**

**Current Mailing Address:**

6703 DRYDEN CT.  
BOYNTON BEACH, FL 33436

**New Mailing Address:**

**FEI Number:** 41-2235968      **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:**

PASQUINI, MICHAEL  
11211 S. MILITARY TRAIL  
5613  
BOYNTON BEACH, FL 33436 US

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

PASQUINI, MICHAEL  
6703 DRYDEN CT.  
BOYNTON BEACH, FL 33436 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: MICHAEL PASQUINI

10/16/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: PASQUINI, MICHAEL  
Address: 11211 S. MILITARY TRAIL  
City-St-Zip: BOYNTON BEACH, FL 33436

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: PASQUINI, MICHAEL  
Address: 6703 DRYDEN CT.  
City-St-Zip: BOYNTON BEACH, FL 33436

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: MICHAEL PASQUINI

MGR

10/16/2008

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