

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000034872

Entity Name: COASTAL GAMES LLC

FILED
Nov 24, 2008
Secretary of State

Current Principal Place of Business:

314 ALEXANDRA WOODS DRIVE
DEBARY, FL 32713

New Principal Place of Business:

Current Mailing Address:

314 ALEXANDRA WOODS DRIVE
DEBARY, FL 32713

New Mailing Address:

FEI Number: 20-8762451 FEI Number Applied For () 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:

Name and Address of New Registered Agent:

MATHIS, KELLY B ESQ
50 NORTH LAURA STREET
SUITE 1700
JACKSONVILLE, FL 32202 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: KELLY B. MATHIS

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PARKER, TONY J
Address: 2190 AIRPORT ROAD
City-St-Zip: LANCASTER, SC 29720

Title: MGRM () Delete
Name: LUCAS, LEONARD D
Address: 2190 AIRPORT ROAD
City-St-Zip: LANCASTER, SC 29720

Title: MGMR () Delete
Name: HARDEE, CARY G
Address: 2190 AIRPORT ROAD
City-St-Zip: LANCASTER, SC 29720

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: TONY PARKER

MGMR

11/24/2008

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