

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000040555

FILED
Oct 06, 2009
Secretary of State

Entity Name: UNITEDDEVELOPMENT & OSCO LLC

Current Principal Place of Business:

844 PARK VALLEY CIRCLE
MINNEOLA, FL 34715

New Principal Place of Business:

Current Mailing Address:

844 PARK VALLEY CIRCLE
MINNEOLA, FL 34715

New Mailing Address:

FEI Number: 14-1995738 **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:

CILLIERS, OCKERT C
1408 OLD HARBOR BLVD.
SUITE 102
LEESBURG, FL 34748 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: OCKERT CILLIERS

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: CILLIERS, OCKERT C
Address: 1408 OLD HARBOR BLVD., SUITE 102
City-St-Zip: LEESBURG, FL 34748

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

Title: MGRM () Delete
Name: JANSEVANRENSBURG, SAMANTHA
Address: 1408 OLD HARBOR BLVD., SUITE 102
City-St-Zip: LEESBURG, FL 34748

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

Title: MGRM () Delete
Name: SHANE SMIT, KRISTIN
Address: 931 WILLOW OAK
City-St-Zip: LOOP MINEOLA, FL 34715

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

Title: MGRM () Delete
Name: SHARON SMIT, GAIL
Address: 931 WILLOW OAK
City-St-Zip: LOOP MINEOLA, FL 34715

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: OCKERT CILLIERS

MGRM

10/06/2009

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