

# **2008 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000043858

**FILED**  
**Oct 06, 2008**  
**Secretary of State**

**Entity Name:** SLING SHOT EXPRESS LLC

**Current Principal Place of Business:**

795 SE PORT ST LUCIE BLVD  
SUITE 2  
PORT ST LUCIE, FL 34984

**New Principal Place of Business:**

**Current Mailing Address:**

795 SE PORT ST LUCIE BLVD  
SUITE 2  
PORT ST LUCIE, FL 34984

**New Mailing Address:**

**FEI Number:** 20-8906319

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BIRAN C HERNDON PA  
8418 S US HWY 1  
LAKES PLAZA  
PORT ST LUCIE, FL 34952 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:** BIRAN C HERNDON PA

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM ( ) Delete  
**Name:** O'DONOVAN, MICHAEL  
**Address:** 795 SE PORT ST LUCIE BLVD # 2  
**City-St-Zip:** PORT ST LUCIE, FL 34952

**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:** MICHAEL ODOVONAN

MGM

10/06/2008

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