

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000054073

Entity Name: BELMONT AVENUE, LLC

FILED
Jan 26, 2009
Secretary of State

Current Principal Place of Business:

2316 PINE RIDGE ROAD #300
NAPLES, FL 34109 US

New Principal Place of Business:

Current Mailing Address:

2316 PINE RIDGE ROAD #300
NAPLES, FL 34109 US

New Mailing Address:

2704 BROOKVILLE DRIVE
MANHATTAN, KS 66502 US

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SORRELS, JOE
2316 PINE RIDGE ROAD #300
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

SORRELS, JOE A
2316 PINE RIDGE ROAD #300
NAPLES, FL 34109 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: JOE A. SORRELS

01/26/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SORRELS, JOE A
Address: 2316 PINE RIDGE ROAD #300
City-St-Zip: NAPLES, FL 34109 US

Title: MGR () Delete
Name: SORRELS, CYNTHIA R
Address: 2316 PINE RIDGE ROAD #300
City-St-Zip: NAPLES, FL 34109 US

ADDITIONS/CHANGES:

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: JOE A. SORRELS

MGR

01/26/2009

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