## 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L07000057033

City-St-Zip:

Entity Name: BAOBAB INVESTMENT GROUP LLC

FILED Aug 06, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
233 BURN OVIEDO, I	ISED PLACE FL 32765		
Current Mailing Address:		New Mailing Address:	
PO BOX 2 ORLANDO	968 D, FL 32802		
	: 13-4360322 FEI Number Applied For() FEI ce with s. 607.193(2)(b), F.S., the limited liability company	Number Not App did not receive th	
Name and	Address of Current Registered Agent:	Name and	Address of New Registered Agent:
233 BURN OVIEDO, I	, SHARON B ISED PLACE FL 32765 US named entity submits this statement for the purpos	se of changing	its reaistered office or reaistered agent, or both
	e of Florida.	oc or onanging	no registered embe of registered agent, or beth
SIGNATI II	RE: SHARON B. LETALON		
0.0.0.	Electronic Signature of Registered Agent		Date
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM () Delete LETALON, SHARON B 233 BURNSED PLACE OVIEDO, FL 32765	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	MGRM () Delete MOOMAW, D. MARTIN 10719 SPRING BUCK TRAIL ORLANDO, FL 32825	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGRM () Delete CAMARA MIKE, MUHAMED 233 BURNSED PLACE OVIEDO, FL 32765	Title: Name: Address: City-St-Zip:	MGRM (X) Change ( ) Addition MIKE CAMARA, MUHAMED 233 BURNSED PLACE OVIEDO, FL 32765
Title: Name: Address:	( ) Delete	Title: Name: Address:	MGMR ( ) Change (X) Addition MIKE CAMARA, FATIM 233 BURNSED PLACE

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.

City-St-Zip: OVIEDO, FL 32765

SIGNATURE: DREW M. MOOMAW MGMR 08/06/2009