

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000076116

FILED
Nov 10, 2009
Secretary of State

Entity Name: BARTER MANAGEMENT LLC

Current Principal Place of Business:

244 SHOPPING AVENUE, STE. 267
SARASOTA, FL 34237

New Principal Place of Business:

1123 N. TOLEDO BLADE BLVD
#124
NORTH PORT, FL 34288

Current Mailing Address:

244 SHOPPING AVENUE, STE. 267
SARASOTA, FL 34237

New Mailing Address:

1123 N. TOLEDO BLADE BLVD
#124
NORTH PORT, FL 34288

FEI Number: 26-0637060 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

EILERS, BRENDA
244 SHOPPING AVENUE, STE. 267
SARASOTA, FL 34237 US

Name and Address of New Registered Agent:

EILERS, BRENDA
1123 N. TOLEDO BLADE BLVD
#124
NORTH PORT, FL 34288 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: BRENDA EILERS

11/10/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: EILERS, BRENDA
Address: 244 SHOPPING AVENUE, STE. 267
City-St-Zip: SARASOTA, FL 34237

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: EILERS, BRENDA
Address: 1123 N TOLEDO BLADE BLVD #124
City-St-Zip: NORTH PORT, FL 34288

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: BRENDA EILERS

MGRM

11/10/2009

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