

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000081647

FILED
Mar 12, 2009
Secretary of State

Entity Name: DRIVEN INVESTMENTS, LLC

Current Principal Place of Business:

1829 NORTHWEST 10TH STREET
OCALA, FL 34475

New Principal Place of Business:

10444 E HWY 316
FT MC COY, FL 32134

Current Mailing Address:

1829 NORTHWEST 10TH STREET
OCALA, FL 34475

New Mailing Address:

10444 E HWY 316
FT MC COY, FL 32134

FEI Number: 26-0679978

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

WADE, THOMAS E
10444 E HWY 316
FT MC COY, FL 32134 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: THOMAS E WADE

03/12/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WADE, PETE JR
Address: 1829 NORTHWEST 10TH STREET
City-St-Zip: Ocala, FL 34475

Title: MGR () Delete
Name: WADE, TOM
Address: 1829 NORTHWEST 10TH STREET
City-St-Zip: Ocala, FL 34475

Title: S () Delete
Name: WADE, TOM
Address: 1829 NORTHWEST 10TH STREET
City-St-Zip: Ocala, FL 34475

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: WADE, THOMAS
Address: 10444 E HWY 316
City-St-Zip: FT MC COY, FL 32134

Title: MGR (X) Change () Addition
Name: WADE, PETE JR
Address: 10444 E HWY 316
City-St-Zip: FT MC COY, FL 32134

Title: S (X) Change () Addition
Name: WADE, TOM
Address: 10444 E HWY 316
City-St-Zip: FT MC COY, FL 32134

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: THOMAS WADE

MGR

03/12/2009

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