

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000086100

FILED
Mar 12, 2009
Secretary of State

Entity Name: SNL NON MEDICAL LIMITED LIABILITY COMPANY

Current Principal Place of Business:

2719 ORANGE GROVE TRAIL
NAPLES, FL 34120

New Principal Place of Business:

Current Mailing Address:

2719 ORANGE GROVE TRAIL
NAPLES, FL 34120

New Mailing Address:

FEI Number: 26-1626984 **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:

CARRANZA, GUSTAVO
2719 ORANGE GROVE TRAIL
NAPLES, FL, FL 34120 US

Name and Address of New Registered Agent:

ACCOUNTING PLUS MORE
4100 CORPORATE SQ
150
NAPLES, FL 34104 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: GUSTAVO CARRANZA

03/12/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CARRANZA, GUSTAVO
Address: 2719 ORANGE GROVE TRAIL
City-St-Zip: NAPLES,, FL 34120

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: GUSTAVO CARRANZA

MGR

03/12/2009

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