

attachment 1 of 2

09-09-2008 90031 020 ***138.75
L07000089018

2008 LIMITED LIABILITY COMPANY REINSTATEMENT ANNUAL REPORT

08 DEC - 9 AM 10:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L07000089018 1. Entity Name SUNCLAWS LLC					
Principal Place of Business 6817 MOBILE HWY PENSACOLA, FL 32526 US			Mailing Address 6817 MOBILE HWY PENSACOLA, FL 32526 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country			
4. FEI Number			<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required			08292008 Chg-LLC CR2E083 (12/06)		
6. Name and Address of Current Registered Agent JERNIGAN, PETER 6817 MOBILE HWY PENSACOLA, FL 32526				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reissuance) Signature, typed or printed name of registered agent and title if applicable DATE					
FILE NOW!!! FEE IS \$138.75 Due by September 12, 2008		In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JERNIGAN, PETER 6817 MOBILE HWY PENSACOLA, FL 32526 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	member (MGR) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JERNIGAN, LEA ANNE 6817 MOBILE HWY PENSACOLA, FL 32526 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: <u>L.A. Jernigan</u> mgr m.			8-29-08 850-982-9332		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			<small>Date Daytime Phone #</small>		

REINSTATEMENT 2008

Glover Tax & Accounting, Inc.

Lynis A. Glover
2605 Thomas Drive, Suite 150-B
Panama City Beach, Florida 32408

Telephone (850)236-9374

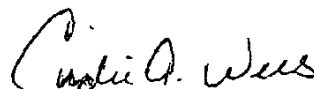
E-mail baycount@knology.net
December 09, 2008

Karen,

Per our conversation this morning RE: the Annual Report for Sunclaws LLC, Document # L007000089018 my clients never received the rejection letter that was sent to them September 2008. They sent the Annual Report with their payment of \$138.75 August 29, 2008 and it cleared their checking account Sept. 9, 2008.

Please waive the \$100.00 reinstatement fee. Thank you for your help this morning making the adjustments to their Annual Report. If there is anything else I need to get to you, please don't hesitate to call me at the number at the top of this letter. I'm faxing a copy of the check with this letter for your records. Once again thank-you for your help. Have a Merry Christmas!

Sincerely,



Cindie A. Wells