

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000102711

FILED
Nov 19, 2008
Secretary of State

Entity Name: AFFLUENT WORLDWIDE, LLC

Current Principal Place of Business:

780 FIFTH AVENUE SOUTH
SUITE 200
NAPLES, FL 34102 US

New Principal Place of Business:

217 N. COLLIER BLVD.
CROWN ROYAL PLAZA SUITE 101
MARCO ISLAND, FL 34145 US

Current Mailing Address:

780 FIFTH AVENUE SOUTH
SUITE 200
NAPLES, FL 34102 US

New Mailing Address:

217 N. COLLIER BLVD.
CROWN ROYAL PLAZA SUITE 101
MARCO ISLAND, FL 34145 US

FEI Number: 26-1463165 **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:

NEALE, PATRICK H
950 NORTH COLLIER BLVD
SUITE 411
MARCO ISLAND, FL 34145 US

Name and Address of New Registered Agent:

TRZYNA, MICHAEL A
217 N. COLLIER BLVD
CROWN ROYAL PLAZA SUITE 101
MARCO ISLAND, FL 34145 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: MICHAEL A. TRZYNA

11/19/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TRZYNA, MICHAEL
Address: 780 FIFTH AVENUE SOUTH, SUITE 200
City-St-Zip: NAPLES, FL 34102 US

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: MICHAEL A. TRZYNA

MGMR

11/19/2008

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