

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000103692

FILED
Nov 04, 2008
Secretary of State

Entity Name: PORTFOLIO SPECIALTIES LLC

Current Principal Place of Business:

448 CAVIAR DRIVE
FORT WALTON BEACH, FL 32548

New Principal Place of Business:

Current Mailing Address:

448 CAVIAR DRIVE
FORT WALTON BEACH, FL 32548

New Mailing Address:

FEI Number: 26-1218852 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:

Name and Address of New Registered Agent:

INGRAM, DOUGLAS T JR.
1150 AIRPORT RD
UNIT 172
DESTIN, FL 32541 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: DOUGLAS INGRAM JR

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KING, MICHAEL
Address: 448 CAVIAR DRIVE
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: MGR () Delete
Name: KING, CHRISTA
Address: 448 CAVIAR DRIVE
City-St-Zip: FORT WALTON BEACH, FL 32548

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHEAL KING

MGRM

11/04/2008

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