2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000103915

Entity Name: JANDSEXCEL, LLC

FILED Nov 23, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

643 DUNDEE CIRCLE

WEST MELBOURNE, FL 32904

Current Mailing Address: New Mailing Address:

643 DUNDEE CIRCLE

WEST MELBOURNE, FL 32904

FEI Number: 26-1286574 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:

SCHMIDT, JERRY

1026 ALPINE AVE NW

SCHMIDT, JERRY

643 DUNDEE CIRCLE

PALM BAY, FL 32907 US WEST MELBOURNE, FL 32904 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: JERRY SCHMIDT 11/23/2008

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES:

MANAGING MEMBERS/MANAGERS:

MGR () Delete Title: MGR (X) Change () Addition

Name: SCHMIDT, JERRY Name: SCHMIDT, JERRY
Address: 1026 ALPINE AVE NW Address: 643 DUNDEE CIRCLE

City-St-Zip: PALM BAY, FL 32907 City-St-Zip: WEST MELBOURNE, FL 32904

Title: MGR () Delete Title: MGR (X) Change () Addition Name: SCHMIDT, SUSAN Name: SCHMIDT, SUSAN

Address: 1026 ALPINE AVE NW Address: 643 DUNDEE CIRCLE
City-St-Zip: PALM BAY, FL 32907 City-St-Zip: WEST MELBOURNE, FL 32904

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: JERRY SCHMIDT MGR 11/23/2008