

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000113717

Entity Name: ROSHA VENTURES, LLC

**FILED**  
**Jan 20, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

39 SECOND CT  
SANTA BEACH, FL 32459 US

**New Principal Place of Business:**

2705 SCENIC HWY 98  
UNIT C-A  
DESTIN, FL 32541 US

**Current Mailing Address:**

P.O. BOX 2353  
SANTA ROSA BEACH, FL 32459 US

**New Mailing Address:**

2705 SCENIC HWY 98  
UNIT C-A  
DESTIN, FL 32541 US

FEI Number: 26-1492968

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

HOWELL, SHANNON W  
39 SECOND CT  
SANTA ROSA BEACH, FL 32459 US

**Name and Address of New Registered Agent:**

HOWELL, SHANNON W  
2705 SCENIC HWY 98  
UNIT C-A  
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: SHANNON HOWELL

01/20/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: HOWELL, SHANNON W  
Address: 2705 SCENIC HWY 98 UNIT C-A  
City-St-Zip: DESTIN, FL 32541 US

Title: MGRM  
Name: OLIN, RYAN  
Address: 4438 WINDWARD LANE COVE  
City-St-Zip: NICEVILLE, FL 32578 US

I hereby 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: SHANNON HOWELL

MGRM

01/20/2012

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