

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000113982

**FILED**  
**Aug 10, 2010**  
**Secretary of State**

**Entity Name:** ECKHARDT PERFORMANCE, LLC

**Current Principal Place of Business:**

4084 BATON ROUGE WAY  
COOPER CITY, FL 33026

**New Principal Place of Business:**

**Current Mailing Address:**

4084 BATON ROUGE WAY  
COOPER CITY, FL 33026

**New Mailing Address:**

**FEI Number:** 26-1395871

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

KAPLAN, STANLEY P P.A.  
19 WEST FLAGLER STREET  
#305  
MIAMI, FL 33130 US

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

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:** STANLEY P. KAPLAN

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** ECKHARDT, KARL  
**Address:** 4084 BATON ROUGE WAY  
**City-St-Zip:** COOPER CITY, FL 33026

**Title:** MGRM  
**Name:** ECKHARDT, MATTHEW  
**Address:** 4084 BATON ROUGE WAY  
**City-St-Zip:** COOPER CITY, FL 33026

**Title:** MGRM  
**Name:** ECKHARDT, KIM  
**Address:** 4084 BATON ROUGE WAY  
**City-St-Zip:** COOPER CITY, FL 33026

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:** KIM ECKHARDT

MGRM

08/10/2010

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