

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000120965

**FILED**  
**Dec 03, 2008**  
**Secretary of State**

**Entity Name:** SCORPION INTERNATIONAL, LLC

**Current Principal Place of Business:**

515 27TH STREET EAST SUITE 1  
BRADENTON, FL 34202 US

**New Principal Place of Business:**

45400 CLAY GULLY RD  
MYAKKA, FL 34251 US

**Current Mailing Address:**

P.O. BOX 422  
MYAKKA CITY, FL 34251 US

**New Mailing Address:**

**FEI Number:**  **FEI Number Applied For ( )**  **FEI Number Not Applicable (X)**  **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:**

SMALLBIZ AGENTS, LLC  
4244 W. TENNESSEE ST. #185  
TALLAHASSEE, FL 32304 US

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

MOREL, RAMON F CEO  
45400 CLAY GULLY RD  
MYAKKA, FL 34251 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: RAMON F MOREL

12/03/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  Delete  
Name: MOREL, RAMON  
Address: P.O. BOX 422  
City-St-Zip: MYAKKA CITY, FL 34251 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: RAMON F MOREL

MGR

12/03/2008

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