## 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L07000121386

City-St-Zip:

Entity Name: VOELKER SURVEYING, LLC

FILED Oct 25, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 605 N COUNTY HWY 393 **UNIT 9B** SANTA ROSA BEACH, FL 32459 **New Mailing Address: Current Mailing Address:** 605 N COUNTY HWY 393 **UNIT 9B** SANTA ROSA BEACH, FL 32459 FEI Number: 35-2319080 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: VOELKER, MICHELLE T 9845 COUNTY HWY 183 SOUTH PONCE DE LEON, FL 32455 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: MICHELLE T. VOELKER Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete VOELKER, RONALD J JR Name: Name: Address: 605 N COUNTY HWY 393 Address:

City-St-Zip:

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

 Name:
 VOELKER, MICHELLE T
 Name:

 Address:
 9845 COUNTY HWY 183 SOUTH
 Address:

 City-St-Zip:
 PONCE DE LEON, FL 32455
 City-St-Zip:

SANTA ROSA BEACH, FL 32459

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: MICHELLE T. VOELKER MGR 10/25/2008