

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 09, 2009
Secretary of State

DOCUMENT# L08000010346

Entity Name: SKI NETWORKING GROUP, LLC

Current Principal Place of Business:

6600 NW 16TH STREET
SUITE 5
PLANTATION, FL 33313

New Principal Place of Business:

Current Mailing Address:

6600 NW 16TH STREET
SUITE 5
PLANTATION, FL 33313

New Mailing Address:

FEI Number: FEI Number Applied For (X) 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:

KATZ, EVAN
6600 NW 16TH STREET
SUITE 5
PLANTATION, FL FL 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: GREGORY SHAW

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: SAAVEDRA, JORGE F
Address: 6600 NW 16 STREET #5
City-St-Zip: PLANTATION, FL 33313

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Delete
Name: SHAW, GREGORY A
Address: 6600 NW 16TH STREET #5
City-St-Zip: PLANTATION, FL 33313

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Delete
Name: KATZ, EVAN
Address: 6600 NW 16TH STREET #5
City-St-Zip: PLANTATION, FL 33313

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: GREGORY SHAW

MGRM

10/09/2009

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