2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000017364

Entity Name: SUNSOLUTIONS INSURANCE AGENCY, LLC

FILED Oct 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8455 SW 101ST PL RD 1805 SE 16TH AVENUE OCALA, FL 34481

SUITE 1301 OCALA, FL 34471

Current Mailing Address: New Mailing Address:

1805 SE 16TH AVENUE 1515 NE 22ND AVENUE

SUITE 3 SUITE 1301 OCALA, FL 34470 OCALA, FL 34471

FEI Number: 33-1203865 FEI Number Applied For () 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:

GOUDEAU, ANGELA M GOUDEAU, ANGELA M 8455 SW 101ST PL RD 1805 SE 16TH AVENUE OCALA, FL FL **SUITE 1301** OCALA, 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: ANGELA GOUDEAU 10/23/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

GOUDEAU, ANGELA M GOUDEAU, ANGELA M Name: Name: Address: 8455 SW 101ST PL RD Address: 1805 SE 16TH AVENUE City-St-Zip: OCALA, FL 34481 City-St-Zip: OCALA, FL 34471

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: ANGELA GOUDEAU 10/23/2009