

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000023351

FILED  
Sep 29, 2009  
Secretary of State

Entity Name: GRASS ROOT NATION LLC

**Current Principal Place of Business:**

2702 NORTH FLORIDA AVENUE  
TAMPA, FL 33602 US

**New Principal Place of Business:**

1212 SOUTH FLORIDA AVE  
LAKELAND, FL 33803 US

**Current Mailing Address:**

2702 NORTH FLORIDA AVENUE  
TAMPA, FL 33602 US

**New Mailing Address:**

1212 SOUTH FLORIDA AVE  
LAKELAND, FL 33803 US

FEI Number: 26-2622577      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:**

UNITED STATES CORPORATION AGENTS, INC.  
320 S. FLAMINGO ROAD  
347  
PEMBROKE PINES, FL 33027 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: SABRINA AIRD

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: AIRD, SABRINA  
Address: 2702 NORTH FLORIDA AVENUE  
City-St-Zip: TAMPA, FL 33602 US

Title: MGRM (X) Delete  
Name: STERLING, SPENCER  
Address: 2702 NORTH FLORIDA AVENUE  
City-St-Zip: TAMPA, FL 33602 US

**ADDITIONS/CHANGES:**

Title: COO (X) Change ( ) Addition  
Name: AIRD, SABRINA  
Address: 1212 SOUTH FLORIDA AVE  
City-St-Zip: LAKELAND, FL 33803

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: SABRINA AIRD

COO

09/29/2009

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