

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000049707

FILED
Oct 28, 2009
Secretary of State

Entity Name: EMERALD ISLE REAL ESTATE HOLDINGS, L.L.C.

Current Principal Place of Business:

6666 110TH STREET
SEBASTIAN, FL 32958

New Principal Place of Business:

Current Mailing Address:

6666 110TH STREET
SEBASTIAN, FL 32958

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:

WEALTH MANAGEMENT SYSTEMS
701E SEBASTIAN BLVD.
SEBASTIAN, FL FL US

Name and Address of New Registered Agent:

WEALTH MANAGEMENT CONSULTANTS
701 SEBASTIAN BLVD.
SUITE E
SEBASTIAN, 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: KRISTIN M. LITTS, JD, LLM

10/28/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SIGMAN, TIMOTHY S
Address: 6666 110TH STREET
City-St-Zip: SEBASTIAN, FL 32958

Title: MGRM () Delete
Name: SIGMAN, ELIZABETH L
Address: 6666 110TH STREET
City-St-Zip: SEBASTIAN, FL 32958

ADDITIONS/CHANGES:

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

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: ELIZABETH SIGMAN

MGRM

10/28/2009

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