2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 13, 2009
Secretary of State

DOCUMENT# L08000078352

Entity Name: EIGHT ARROWS, LLC

Current Principal Place of Business:

2645 SW 91ST STREET, SUITE 400
GAINESVILLE, FL 32607 US

New Principal Place of Business:

Current Mailing Address:

10209 SW 38TH PLACE
GAINESVILLE, FL 32607

New Mailing Address:

FEI Number: 26-3172793 **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:

JOSE I MORENO PA
240 NW 76TH DRIVE
SUITE D
GAINESVILLE, FL 32607 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: JOSE I MORENO PA

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: ACEVEDO, LUIS
Address: 10209 SW 38TH PLACE
City-St-Zip: GAINESVILLE, FL 32607 US

Title: MGRM ( ) Delete
Name: ACEVEDO, MABELISSA
Address: 4010-A NEWBERRY ROAD
City-St-Zip: GAINESVILLE, FL 32607 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: ACEVEDO, LOUIS
Address: 10209 SW 38TH PLACE
City-St-Zip: GAINESVILLE, FL 32607 US

Title: MGRM (X) Change ( ) Addition
Name: ACEVEDO, MABELISSA
Address: 10209 SW 38TH PL
City-St-Zip: GAINESVILLE, FL 32607 US

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: MABELISSA ACEVEDO MGR 10/13/2009

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