

# **2009 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000080019

Entity Name: RODEO I LLC

**FILED**  
**Oct 22, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

14710 DR MARTIN LUTHER KING JR BLVD  
DOVER, FL 33527

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 1195  
LABELLE, FL 33975

**New Mailing Address:**

FEI Number: 80-0242887      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

MUSTAFA, NACER F  
4027 E SUNFLOWER CIR  
LABELLE, FL 33935      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: NACER MUSTAFA

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: MUSTALA, NACEL F  
Address: PO BOX 1195  
City-St-Zip: LABELLE, FL 33975

**ADDITIONS/CHANGES:**

Title: MGRM      (X) Change      ( ) Addition  
Name: MUSTALA, NACER F  
Address: PO BOX 1195  
City-St-Zip: LABELLE, FL 33975

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: NACER MUSTAFA

OWNE

10/22/2009

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