

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000099818

FILED
Nov 13, 2009
Secretary of State

Entity Name: DEEPSTACKS VENTURES, LLC

Current Principal Place of Business:

3191 MAGUIRE BLVD., SUITE 190
ORLANDO, FL 32803

New Principal Place of Business:

40 MARIGOLD LANE
DEBARY, FL 32713

Current Mailing Address:

3191 MAGUIRE BLVD., SUITE 190
ORLANDO, FL 32803

New Mailing Address:

40 MARIGOLD LANE
DEBARY, FL 32713

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:

PREWITT, SCOTT D
3191 MAGUIRE BLVD., SUITE 190
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

TORINA, CHRISTOPHER
40 MARIGOLD LANE
DEBARY, FL 32713 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: CHRISTOPHER TORINA

11/13/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PREWITT, SCOTT D
Address: 3191 MAGUIRE BLVD., SUITE 190
City-St-Zip: ORLANDO, FL 32803

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: TORINA, CHRISTOPHER
Address: 40 MARIGOLD LANE
City-St-Zip: DEBARY, FL 32713

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: CHRISTOPHER TORINA

MGRM

11/13/2009

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