

# **2009 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000000487

**FILED**  
**Dec 03, 2009**  
**Secretary of State**

**Entity Name:** ELKTON USA LLC

**Current Principal Place of Business:**

445 GRAND BAY DRIVE, #315  
KEY BISCAYNE, FL 33149

**New Principal Place of Business:**

**Current Mailing Address:**

430 GRAND BAY DRIVE, #607  
KEY BISCAYNE, FL 33149

**New Mailing Address:**

445 GRAND BAY DR. #315  
KEY BISCAYNE, FL 33149

**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:**

**Name and Address of New Registered Agent:**

GOMEZ, MANUEL JR.  
445 GRAND BAY DRIVE, #315  
KEY BISCAYNE, FL 33149 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: MANUEL GOMEZ

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGR ( ) Delete  
Name: GOMEZ, MANUEL JR.  
Address: 445 GRAND BAY DRIVE, #315  
City-St-Zip: KEY BISCAYNE, FL 33149

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: MANUEL GOMEZ

MGR

12/03/2009

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