

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000024144

**FILED**  
**Aug 29, 2011**  
**Secretary of State**

**Entity Name:** DIVERSIFIED WEB SALES LLC

**Current Principal Place of Business:**

10870 SOUTH US#1  
SUITE 101  
PORT ST. LUCIE, FL 34952

**New Principal Place of Business:**

6639 SOUTH U.S.#1  
FORT PIERCE, FL 34950

**Current Mailing Address:**

10870 SOUTH US#1  
SUITE 101  
PORT ST. LUCIE, FL 34952

**New Mailing Address:**

3606 EAST WILDERNESS DR.  
FORT PIERCE, FL 34982

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

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

COLEAN, WILLIAM B  
2596 NE LETITIA ST.  
JENSEN BEACH, FL 34957      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: WILLIAM B. COLEAN

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: COLEAN, WILLIAM B  
Address: 2596 NE LETITIA ST.  
City-St-Zip: JENSEN BEACH, FL 34957

Title: MGRM  
Name: TAYLOR, CHAD  
Address: 3606 EAST WILDERNESS DR.  
City-St-Zip: FT. PIERCE, FL 34982

I hereby 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: WILLIAM B. COLEAN

MGRM

08/29/2011

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