

**2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000029337

**FILED  
Mar 24, 2011  
Secretary of State**

**Entity Name:** INVENUITIES, LLC

**Current Principal Place of Business:**

11216 TAMIAMI TRAIL N  
SUITE 507  
NAPLES, FL 34110

**New Principal Place of Business:**

**Current Mailing Address:**

11216 TAMIAMI TRAIL N  
SUITE 507  
NAPLES, FL 34110

**New Mailing Address:**

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

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301    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: MICHELE L. ABBOTT

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: FERRARA, KIRSTEN  
Address: 11216 TAMIAMI TRAIL N, STE 507  
City-St-Zip: NAPLES, FL 34110

Title: MGRM  
Name: SULLIVAN, FRANKLIN  
Address: 11216 TAMIAMI TRAIL N, STE 507  
City-St-Zip: NAPLES, FL 34110

Title: MGRM  
Name: SULLIVAN, DARCY  
Address: 11216 TAMIAMI TRAIL N, STE 507  
City-St-Zip: NAPLES, FL 34110

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: KIRSTEN FERRARA

MGRM

03/24/2011

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