

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000052990

**FILED**  
**Nov 04, 2010**  
**Secretary of State**

**Entity Name:** GULF SHORE ASSET MANAGEMENT, LLC

**Current Principal Place of Business:**

4951 GULF SHORE BLVD N  
STE # 904  
NAPLES, FL 34103 US

**New Principal Place of Business:**

**Current Mailing Address:**

4951 GULF SHORE BLVD N  
STE # 904  
NAPLES, FL 34103 US

**New Mailing Address:**

**FEI Number:** 27-0296978

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**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:** DEBBIE SKIPPER

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** FIXELLE, ADAM  
**Address:** 4951 GULF SHORE BLVD N STE # 904  
**City-St-Zip:** NAPLES, FL 34103 US

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:** ADAM FIXELLE

MGRM

11/04/2010

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