

2011 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L09000108782

Entity Name: WILDLIFE ALLIES, LLC

FILED
Mar 01, 2011
Secretary of State

Current Principal Place of Business:

1218 JASPER ST.
PORT CHARLOTTE, FL 33952 US

New Principal Place of Business:

3849 ACLINE ROAD
UNIT 306
PUNTA GORDA, FL 33950 US

Current Mailing Address:

1218 JASPER ST.
PORT CHARLOTTE, FL 33952 US

New Mailing Address:

3849 ACLINE ROAD
UNIT 306
PUNTA GORDA, FL 33950 US

FEI Number: 27-1303428

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADAMS, MATTHEW
1218 JASPER ST.
PORT CHARLOTTE, FL 33952 US

Name and Address of New Registered Agent:

DEVRIES, KIRK N
440 PORTO ALEGRE ST
PUNTA GORDA, FL 33983 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: KIRK N. DEVRIES

03/01/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: DEVRIES, KIRK
Address: 1218 JASPER ST.
City-St-Zip: PORT CHARLOTTE, FL 33952 US

Title: MGRM
Name: ADAMS, MATTHEW
Address: 1218 JASPER ST.
City-St-Zip: PORT CHARLOTTE, FL 33952 US

Title: MGRM
Name: DEVRIES, KEVIN
Address: 30154 ALDER ROAD
City-St-Zip: PUNTA GORDA, FL 33982

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: KIRK N. DEVRIES

MGRM

03/01/2011

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