

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000011574

**FILED**  
**Dec 05, 2011**  
**Secretary of State**

**Entity Name:** ELEVATION DEVELOPMENT PARTNERS, LLC

**Current Principal Place of Business:**

3277 C FRUITVILLE ROAD SUITE 1  
SARASOTA, FL 34237

**New Principal Place of Business:**

1266 1ST STREET  
SUITE 9  
SARASOTA, FL 34236

**Current Mailing Address:**

3277 C FRUITVILLE ROAD SUITE 1  
SARASOTA, FL 34237

**New Mailing Address:**

P.O. BOX 2339  
SARASOTA, FL 34230

**FEI Number:** 25-5345570

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CLABAUGH, JAMES E  
3277 C FRUITVILLE ROAD SUITE 1  
SARASOTA, FL 34237 US

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

CLABAUGH, JAMES E  
1266 1ST STREET  
SUITE 9  
SARASOTA, FL 34236 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: JAMES E. CLABAUGH

12/05/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MR.  
Name: CLABAUGH, JAMES E  
Address: PO BOX 2583  
City-St-Zip: SARASOTA, FL 34230

Title: MR.  
Name: SHKOR, JOHN  
Address: 2317 N CLEVELAND  
City-St-Zip: CHICAGO, IL 60614

Title: MS.  
Name: MCCULLOUGH, PAMELA A  
Address: PO BOX 916  
City-St-Zip: SARASOTA, FL 34236

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: JAMES E. CLABAUGH

MGRM

12/05/2011

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