

2011 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L10000058235

FILED
Oct 19, 2011
Secretary of State

Entity Name: TEAM PERFORMANCE PRODUCTS, LLC

Current Principal Place of Business:

2081 N. POINTE ALEXIS DRIVE
TARPON SPRINGS, FL 34689

New Principal Place of Business:

2300 TALL PINES DR.
SUITE 120
LARGO,, FL 33771 US

Current Mailing Address:

2081 N. POINTE ALEXIS DRIVE
TARPON SPRINGS, FL 34689

New Mailing Address:

2300 TALL PINES DR.
SUITE 120
LARGO,, FL 33771 US

FEI Number: 27-2771849

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LARSON, SHARON
4793 BRAYTON TERRACE S
PALM HARBOR, FL 34685 US

Name and Address of New Registered Agent:

PAULTON, DARIN
2300 TALL PINES DR.
SUITE 120
LARGO, FL 33771 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: DARIN PAULTON

10/19/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: PAULTON, DARIN
Address: 2300 TALL PINES DR., STE. 120
City-St-Zip: LARGO, FL 33771

Title: MGR
Name: STRATIX SOLUTIONS GROUP, INC.
Address: 2300 TALL PINES DR., STE. 120
City-St-Zip: LARGO, FL 33771 US

Title: MGR
Name: LEFFLER, TRACY
Address: 2081 N. POINTE ALEXIS DRIVE
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: MGR
Name: LEFFLER, ALLAN
Address: 2081 N. POINTE ALEXIS DRIVE
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: MGR
Name: LANG, DOUG
Address: 2300 TALL PINES DR., STE. 120
City-St-Zip: LARGO, FL 33771 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: DARIN PAULTON

MGR

10/19/2011

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