

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L96000001222

FILED
Oct 25, 2005
Secretary of State

Entity Name: MARINE MANAGEMENT CONSULTANTS, L.C.

Current Principal Place of Business:

86 CAYMAN PLACE
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

Current Mailing Address:

86 CAYMAN PLACE
PALM BEACH GARDENS, FL 33418

New Mailing Address:

FEI Number: 63-1184695 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: JANET BUDHU ASST. V.P.

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: JOHNSON, STEPHEN R
Address: 86 CAYMAN PLACE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR () Delete
Name: JOHNSON, KAREN E
Address: 86 CAYMAN PLACE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: MGRM (X) Change () Addition
Name: JOHNSON, KAREN E
Address: 86 CAYMAN PLACE
City-St-Zip: PALM BEACH GARDENS, FL 33418

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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: STEPHEN R. JOHNSON

MGRM

10/25/2005

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