

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L98000001799

Entity Name: THURSDAY LEASING, L.C.

FILED  
Nov 12, 2009  
Secretary of State

**Current Principal Place of Business:**

515 DISTRIBUTION DRIVE  
MELBOURNE, FL 32904

**New Principal Place of Business:**

**Current Mailing Address:**

515 DISTRIBUTION DRIVE  
MELBOURNE, FL 32904

**New Mailing Address:**

FEI Number: 59-3541690      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:**

GLOVER, ROBERT G  
515 DISTRIBUTION DRIVE  
MELBOURNE, FL 32904      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: ROBERT G GLOVER

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: DAVIS, TOM K  
Address: 3760 N. RIVERSIDE DRIVE  
City-St-Zip: INDIALANTIC, FL 32903

Title: MGRM ( ) Delete  
Name: GLOVER, ROBERT G  
Address: 1395 RUFFIN CIRCLE, S.E.  
City-St-Zip: PALM BAY, FL 32909

Title: MGRM ( ) Delete  
Name: DAVIS, KASEY L  
Address: 272 MARION STREET  
City-St-Zip: INDIAN HARBOR BEACH, FL 32937

**ADDITIONS/CHANGES:**

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ROBERT G GLOVER

PRES

11/12/2009

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