

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L98000002914

Entity Name: FEI MITBANK, L.L.C.

**FILED**  
**Apr 25, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2579 N. TOLEDO BLADE BLVD  
NORTH PORT, FL 34286 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O JACK O. HACKETT II  
99 NESBIT STREET  
PUNTA GORDA, FL 33950 US

**New Mailing Address:**

FEI Number: 65-0883660

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HACKETT, JACK O II  
99 NESBIT STREET  
PUNTA GORDA, FL 33950 US

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

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: JACK O. HACKETT II

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ROSS, DONALD H  
Address: 2579 N. TOLEDO BLADE BLVD  
City-St-Zip: NORTH PORT, FL 34286 US

Title: MGRM  
Name: KOCUR, CHARLES L  
Address: 2579 N. TOLEDO BLADE BLVD  
City-St-Zip: NORTH PORT, FL 34286 US

Title: MGRM  
Name: DODD, ANDREW J  
Address: 2579 N. TOLEDO BLADE BLVD  
City-St-Zip: NORTH PORT, FL 34286 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: DONALD H. ROSS

MGRM

04/25/2011

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