

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L99000004916

Entity Name: DENSON CO., L.C.

FILED
Oct 10, 2006
Secretary of State

Current Principal Place of Business:

401 PAPAYA STREET
GOODLAND, FL 34140

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 157
GOODLAND, FL 34140

New Mailing Address:

FEI Number: 31-1660213 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:

BALANTE, MICHELLE
401 PAPAYA STREET
GOODLAND, FL 34140 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: MICHELLE BALANTE

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BALANTE, DENNIS C
Address: 10555 PROUTY RD.
City-St-Zip: CONCORD, OH 44077

Title: MGR () Delete
Name: BALANTE, TRACY S
Address: 10555 PROUTY RD.
City-St-Zip: CONCORD, OH 44077

Title: MGR () Delete
Name: BALANTE, DENNIS S
Address: 10555 PROUTY RD.
City-St-Zip: CONCORD, OH 44077

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 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: MICHELLE BALANTE

MGR

10/10/2006

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