

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M00000000723

Entity Name: SI SERVICES COMPANY, L.L.C.

FILED
Jan 12, 2009
Secretary of State

Current Principal Place of Business:

12600 GATEWAY BOULEVARD
FT MYERS, FL 33913

New Principal Place of Business:

Current Mailing Address:

12600 GATEWAY BOULEVARD
FT MYERS, FL 33913

New Mailing Address:

C/O M LA CROIX
1361 ROYAL PALM SQ BLVD, STE 1
FT MYERS, FL 33919 US

FEI Number: 94-3346379 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:

HALLIGAN, JOHN
12600 GATEWAY BOULEVARD
FT MYERS, FL 33913 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: JOHN HALLIGAN

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FERNANDEZ, MANNY
Address: 12600 GATEWAY BOULEVARD
City-St-Zip: FT MYERS, FL 33913

Title: MGRM () Delete
Name: HALLIGAN, JOHN
Address: 12600 GATEWAY BOULEVARD
City-St-Zip: FORT MYERS, FL 33913

ADDITIONS/CHANGES:

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: JOHN HALLIGAN

MGRM

01/12/2009

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