

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M06000000149

FILED
Jan 29, 2009
Secretary of State

Entity Name: MARK TWAIN HOLDING COMPANY, LLC

Current Principal Place of Business:

6739 COUNTY ROAD 423
PALMYRA, MO 63461

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 430
HANNIBAL, MO 63401

New Mailing Address:

FEI Number: 20-2111520

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: C T CORPORATION SYSTEM

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BROSS, JEFFREY
Address: 6739 COUNTY ROAD 423
City-St-Zip: PALMYRA, MO 63461

Title: MGR () Delete
Name: BROSS, MICHAEL
Address: 6739 COUNTY ROAD 423
City-St-Zip: HANNIBAL, MO 63461

Title: MGR () Delete
Name: BROSS, MARK
Address: 6739 COUNTY ROAD 423
City-St-Zip: PALMYRA, MO 63461

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: MARK K. BROSS

MGR

01/29/2009

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