

# **2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# M06000004531

Entity Name: SARASOTA ROCKS, LLC

**FILED**  
**Oct 30, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

701 NORTHPOINT PARKWAY, STE. 220  
WEST PALM BEACH, FL 33407

**New Principal Place of Business:**

9040 TOWN CENTER PARKWAY  
SUITE 104  
BRADENTON, FL 34202

**Current Mailing Address:**

701 NORTHPOINT PARKWAY, STE. 220  
WEST PALM BEACH, FL 33407

**New Mailing Address:**

9040 TOWN CENTER PARKWAY  
SUITE 104  
BRADENTON, FL 34202

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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:**

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE, SUITE 4  
WESTON, FL 33331 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: KRISTY LETO

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: WARREN, ROBERT  
Address: 701 NORTHPOINT PARKWAY, STE. 220  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: MGRM (X) Change ( ) Addition  
Name: WARREN, ROBERT  
Address: 9040 TOWN CENTER PARKWAY  
City-St-Zip: BRADENTON, FL 34202

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 M WARREN

MGRM

10/30/2007

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