

# **2008 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# M07000001052

Entity Name: SHADOW MARINE, LLC

**FILED**  
**Oct 02, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

1535 S.E. 17TH STREET  
FT. LAUDERDALE, FL 333161737

**New Principal Place of Business:**

**Current Mailing Address:**

1535 S.E. 17TH STREET  
FT. LAUDERDALE, FL 333161737

**New Mailing Address:**

1200 CYPRESS CREEK ROAD  
FT. LAUDERDALE, FL 33309

FEI Number: 20-3935545      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

CHANDROSS, MICHAEL G  
2300 WEST SAMPLE ROAD, SUITE 202  
POMPANO BEACH, FL 33073      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: MICHAEL G CHANDROSS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: GONZALES, TOM  
Address: 1200 CYPRESS CREEK ROAD  
City-St-Zip: FT. LAUDERDALE, FL 33309

**ADDITIONS/CHANGES:**

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: TOM GONZALES

MGR

10/02/2008

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