2005 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 09, 2005
Secretary of State

DOCUMENT# M97000000669

Entity Name: LEWIS E. WEEKS, L.L.C.

Current Principal Place of Business:

2 ALSTON ROAD
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

Current Mailing Address:

2 ALSTON ROAD
PALM BEACH GARDENS, FL 33418

New Mailing Address:

FEI Number: 54-1867501 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEEKS, MARION C
2 ALSTON ROAD
PALM BEACH GARDENS, FL 33418 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: MARION C WEEKS

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: WEEKS, MARION C
Address: 2 ALSTON ROAD
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: MGRM ( ) Delete
Name: ESTEY, MARGARET L
Address: 2 ALSTON ROAD
City-St-Zip: PALM BEACH GARDENS, FL 33418

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 for the exemption stated in Section 119.07(3)(i), 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: MARION C WEEKS MGRM 10/09/2005

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