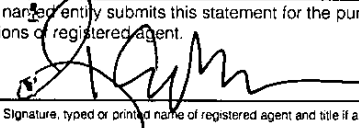


2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # 723866 1. Entity Name CYPRESS LAKE NO. 3, INC.						FILED 06 MAR 14 AM 10:54 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 701 S E 15TH ST #4 POMPANO BEACH, FL 33060				Mailing Address 701 S E 15TH ST #4 POMPANO BEACH, FL 33060			
2. Principal Place of Business Suite, Apt. #, etc.				3. Mailing Address Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
4. FEI Number 59-2087980				Applied For ☐ Not Applicable			
5. Certificate of Status Desired ☒				\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent RUSSELL, EDWARDS 701 SE 15TH ST #4 POMPANO BEACH, FL 33060				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
8. 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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.				Russell Edwards (NOTE: Registered Agent signature required when reinstating)			
DATE 3-3-06				DATE			
FILE NOW!!! FEE IS \$297.50				Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD RUSSELL, EDWARDS 701 SE 15TH ST POMPANO BEACH, FL ☐ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HAILEY, CINDY 701 SE 15TH STREET POMPANO BEACH, FL ☐ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHERWOOD, BOB 701 SE 15TH ST POMPANO BEACH, FL ☒ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Tyude Allbright 701 SE 15TH ST POMPANO BEACH, FL ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HALLEY, JOHN 701 SE 15TH ST POMPANO BEACH, FL ☐ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Russell Edwards			
Date				3-3-06			
Daytime Phone #				954-784-4859			