

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L01000020187

FILED
May 16, 2006
Secretary of State

Entity Name: SHAFER DEVELOPMENT, L.L.C.

Current Principal Place of Business:

450 - 106 S.R. 13 NORTH, #201
JACKSONVILLE, FL 32259

New Principal Place of Business:

5000-18 HWY #17
#249
ORANGE PARK, FL 32003 US

Current Mailing Address:

450 - 106 S.R. 13 NORTH, #201
JACKSONVILLE, FL 32259

New Mailing Address:

5000-18 HWY #17
#249
ORANGE PARK, FL 32003 US

FEI Number: 04-3604228 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **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:

SHAFER, HOWARD
450 - 106 S.R. 13 NORTH, #201
JACKSONVILLE, FL 32259 US

Name and Address of New Registered Agent:

SHAFER, HOWARD S
2520 MARLIN CT.
MIDDLEBURG, FL 32068 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: HOWARD S. SHAFER, PRES

05/16/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SHAFER, HOWARD
Address: 450 - 106 S.R. 13 NORTH, #201
City-St-Zip: JACKSONVILLE, FL 32259

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SHAFER, HOWARD S
Address: 2520 MARLIN CT.
City-St-Zip: MIDDLEBURG, FL 32068 US

I hereby certify that the information supplied with this filing does not qualify for the 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: HOWARD S. SHAFER

PRES

05/16/2006

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