

2004 LIMITED LIABILITY COMPANY REINSTATEMENT

**FILED
Nov 08, 2004
Secretary of State**

DOCUMENT# L03000022388

Entity Name: 2065 THOMASVILLE ROAD, LLC.

Current Principal Place of Business:

1882 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32308 US

New Principal Place of Business:

1882 CAPITAL CIRCLE NE
SUITE 106
TALLAHASSEE, FL 32308 US

Current Mailing Address:

1882 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32308 US

New Mailing Address:

1882 CAPITAL CIRCLE NE
SUITE 106
TALLAHASSEE, FL 32308 US

FEI Number: FEI Number Applied For (X) 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:

Name and Address of New Registered Agent:

DEAN, CARLTON
3013 THOMASVILLE ROAD
TALLAHASSEE, FL 32308 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

ADDITIONS/CHANGES:

Title: MGR () Delete
Name: DEAN, CARLTON
Address: 3013 THOMASVILLE ROAD
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR () Delete
Name: RENTZ, FRANCIS
Address: 2941 BRANDEMERE DRIVE
City-St-Zip: TALLAHASSEE, FL 32312 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR () Delete
Name: DEAN, WILSON
Address: 800 GREENBRIER LANE
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: MGR (X) Change () Addition
Name: DEAN, WILSON
Address: 3130 RUE ROYALE
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: MGR () Delete
Name: DEAN, BOB
Address: 601 HILLCREST ST.
City-St-Zip: TALLAHASSEE, FL 32308 US

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: R. CARLTON DEAN

MGR.

11/08/2004

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