

**2006 LIMITED LIABILITY COMPANY REINSTATEMENT**

**FILED  
Oct 11, 2006  
Secretary of State**

DOCUMENT# L04000020720

Entity Name: HOFFMAN, SMITH & ROSS, LLC

**Current Principal Place of Business:**

**New Principal Place of Business:**

P.O BOX 8330  
FLEMING ISLAND, FL 32006

**Current Mailing Address:**

**New Mailing Address:**

P.O. BOX 8330  
FLEMING ISLAND, FL 32006

FEI Number: 20-0991782      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:**

**Name and Address of New Registered Agent:**

HILL, DEBRA S  
8810 GOODBY'S EXECUTIVE DRIVE  
JACKSONVILLE, FL 32217 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: RA

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGR ( ) Delete  
Name: ABANDO, LAURIE  
Address: P.O. BOX 8330  
City-St-Zip: FLEMING ISLAND, FL 32006

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 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: LAURA ABANDO

MGR

10/11/2006

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