

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

**FILED
Apr 11, 2007
Secretary of State**

DOCUMENT# L04000043053

Entity Name: J & N PROPERTIES, L.L.C.

Current Principal Place of Business:

1820 N. CORPORATE LAKES BLVD.,
SUITE # 105
WESTON, FL 33326 US

New Principal Place of Business:

Current Mailing Address:

1820 N. CORPORATE LAKES BLVD.,
SUITE # 105
WESTON, FL 33326 US

New Mailing Address:

FEI Number: 20-8816274 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:

Name and Address of New Registered Agent:

MARRERO, JOSE C ESQ.
1820 N. CORPORATE LAKES BLVD.,
SUITE # 105
WESTON, FL 33326 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: JOSE C. MARRERO, ESQ.

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: MARRERO, JOSE
Address: 1820 N. CORPORATE LAKES BLVD., #105
City-St-Zip: WESTON, FL 33326 US

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

Title: MGRM () Delete
Name: ESPOSITO, RAECHEL NICOLE
Address: 1820 N. CORPORATE LAKES BLVD., #105
City-St-Zip: WESTON, FL 33326

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: JOSE C. MARRERO

MGRM

04/11/2007

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