

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

**FILED
Nov 01, 2009
Secretary of State**

DOCUMENT# L05000012437

Entity Name: CAMELLIA COVE, LLC

Current Principal Place of Business:

602 CAMBRIDGE AVE NE
FT. WALTON BEACH, FL 325471811

New Principal Place of Business:

Current Mailing Address:

602 CAMBRIDGE AVE NE
FT. WALTON BEACH, FL 325471811

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

GRIGGS, ROBERT C
602 CAMBRIDGE AVE NE
FT. WALTON BEACH, FL 325471811 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: ROBERT C. GRIGGS

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GRIGGS, ROBERT C
Address: 602 CAMBRIDGE AVE NE
City-St-Zip: FT. WALTON BEACH, FL 325471811

ADDITIONS/CHANGES:

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

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT C. GRIGGS

MGRM

11/01/2009

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