

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000093181

**FILED**  
**Oct 09, 2007**  
**Secretary of State**

**Entity Name:** SUNFLOWER APARTMENTS LLC

**Current Principal Place of Business:**

310 BLOUNT STREET #108  
TALLAHASSEE, FL 32301

**New Principal Place of Business:**

**Current Mailing Address:**

310 BLOUNT STREET #108  
TALLAHASSEE, FL 32301

**New Mailing Address:**

P.O. BOX 15694  
TALLAHASSEE, FL 32317

**FEI Number:** 87-0787913      **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:**

BURROUGHS, BYREN C  
1514 KUHLACRE DRIVE  
TALLAHASSEE, FL 32308      US

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

ROSEN, DAVID A  
1420 N. MERIDIAN RD  
APT. 113  
TALLAHASSEE, FL 32303      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:** DAVID A. ROSEN

10/09/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM      ( ) Delete  
**Name:** ROSEN, PETER S  
**Address:** 310 BLOUNT STREET #108  
**City-St-Zip:** TALLAHASSEE, FL 32301

**Title:** MGRM      ( ) Delete  
**Name:** ROSEN, MICHAEL  
**Address:** 310 BLOUNT STREET #108  
**City-St-Zip:** TALLAHASSEE, FL 32301

**ADDITIONS/CHANGES:**

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

**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:** PETER S. ROSEN

MNGR

10/09/2007

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