2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000107940

City-St-Zip: FORT PIERCE, FL 34946

Entity Name: WTC UNITED PROPERTIES.LLC

FILED Mar 07, 2009 Secretary of State

Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
5101 MATA FORT PIER	NZAS AVE. CE, FL 34946				
Current Mailing Address:			New Mailing Addr	New Mailing Address:	
5101 MATANZAS AVE. FORT PIERCE, FL 34946			2314 N. 49TH STREET FORT PIERCE, FL 34946		
FEI Number:	20-5828279	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered				s of New Registered Agent:	
5101 MATA	N, JOANNE NZAS AVE PCE, FL 34946	US			
The above in the State		ubmits this statement for the p	urpose of changing its registe	ered office or registered agent, or both,	
SIGNATUR	E: JOANNE 1	HOMPSON			
Electronic Signature of Registered Agent			nt	Date	
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	PRES () I WILLIAMS, STAG 3105 TROPIC BI FORT PIERCE, F	.VD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SEC () I WILLIAMS, TERI 3105 TROPIC BI FORT PIERCE, F	VD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () I THOMPSON, AN 5101 MATANZAS FORT PIERCE, F	AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGR () I THOMPSON, JO. 5101 MATANZAS FORT PIERCE, F	AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	TRES () I COE, BRENDA 2314 N 49TH ST	Delete	Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: JOANNE THOMPSON MGR 03/07/2009