2007 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Dec 11, 2007
Secretary of State

DOCUMENT# L06000114852

Entity Name: SOUTH CHANNEL DRIVE, LLC

Current Principal Place of Business:

5300 S. ATLANTIC AVENUE, STE 5601
NEW SMYRNA BEACH, FL 32169

New Principal Place of Business:

6110 S. ATLANTIC AVENUE
NEW SMYRNA BEACH, FL 32169

Current Mailing Address:

5300 S. ATLANTIC AVENUE, STE 5601
NEW SMYRNA BEACH, FL 32169

New Mailing Address:

6110 S. ATLANTIC AVENUE
NEW SMYRNA BEACH, FL 32169

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LITOWITZ, ARTHUR N
5300 S. ATLANTIC AVENUE, STE 5601
NEW SMYRNA BEACH, FL 32169 US

Name and Address of New Registered Agent:

LITOWITZ, ARTHUR N
6110 S. ATLANTIC AVENUE
NEW SMYRNA BEACH, FL 32169 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: ARTHUR N. LITOWITZ 12/11/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: LITOWITZ HOLDINGS, L, LC
Address: 5300 S. ATLANTIC AVENUE, STE 5601
City-St-Zip: NEW SMYRNA BEACH, FL 32169

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: LITOWITZ HOLDINGS, L, LC
Address: 6110 S. ATLANTIC AVENUE
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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: ARTHUR N. LITOWITZ MGRM 12/11/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date