

**2009 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000087567

**FILED**  
**Oct 21, 2009**  
**Secretary of State**

**Entity Name:** REALTY PROS MANAGEMENT SERVICES LLC

**Current Principal Place of Business:**

1984 US HWY 56 EAST  
SUITE 4A - 467  
CARSON CITY, NE 89701

**New Principal Place of Business:**

**Current Mailing Address:**

5225 A W BROWARD BLVD  
PLANTATION, FL 33317 US

**New Mailing Address:**

**FEI Number:** 26-0546773      **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:**

NARI SERVICES  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 US

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

FM ROBINSON  
5309 W BROWARD BLVD  
SUITE 206  
PLANTATION, FL 33317 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: FM ROBINSON

10/21/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ROBINSON, MIMI  
Address: 1984 US HWY 56 EAST  
City-St-Zip: CARSON CITY, NE 89701

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: ALTY INVESTMENT GROUP  
Address: 1984 US HWY 56 EAST  
City-St-Zip: CARSON CITY, NE 89701

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: ALTY INVESTMENT GROUP

MGR

10/21/2009

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