

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Nov 04, 2008
Secretary of State

DOCUMENT# M06000000757

Entity Name: TRUE NORTH AR, LLC

Current Principal Place of Business:

9 COMMERCIAL BLVD #201
NOVATO, CA 94949

New Principal Place of Business:

Current Mailing Address:

9 COMMERCIAL BLVD #201
NOVATO, CA 94949

New Mailing Address:

FEI Number: 20-1579800 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:

Name and Address of New Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: KATHY DUMONT

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: PETERSON PARTNERS II, I, L.P.
Address: 2825 E. COTTONWOOD PKWY, #400
City-St-Zip: SALT LAKE CITY, UT 84121

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

Title: MGRM () Delete
Name: SHARMA, MANOJ
Address: 9 COMMERCIAL BLVD #201
City-St-Zip: NOVATO, CA 94949

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

Title: MGRM () Delete
Name: NEWMAN, ANCRUM
Address: 9 COMMERCIAL BLVD
City-St-Zip: NOVATO, CA 94949

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

Title: MGRM () Delete
Name: JOHNSON, CHARLES
Address: 2320 CASCADE POINTE BLVD.
City-St-Zip: CHARLOTTE, NC 28208

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: KATHY M DUMONT

CFO

11/04/2008

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