

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L02000006249

FILED
Oct 01, 2009
Secretary of State

Entity Name: MARK ALEXANDER COMMERCIAL REALTY, LLC

Current Principal Place of Business:

6360 PRESIDENTIAL CT
SUITE 2
FT MYERS, FL 33919

New Principal Place of Business:

5121 W. HYDE PARK COURT
SUITE 204
FT MYERS, FL 339112

Current Mailing Address:

6360 PRESIDENTIAL CT
SUITE 2
FT MYERS, FL 33919

New Mailing Address:

5121 W. HYDE PARK COURT
SUITE 204
FT MYERS, FL 339112

FEI Number: 38-3659285 **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:

ALEXANDER, MARK
6360 PRESIDENTIAL CT
SUITE 2
FORT MYERS, FL 33919 US

Name and Address of New Registered Agent:

ALEXANDER, MARK
5121 W. HYDE PARK COURT
SUITE 204
FORT MYERS, FL 33912 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: MARK ALEXANDER

10/01/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ALEXANDER, MARK
Address: 6360-2 PRESIDENTIAL COURT
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ALEXANDER, MARK
Address: 5121 W. HYDE PARK COURT
City-St-Zip: FORT MYERS, FL 33912

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: MARK ALEXANDER

PRES

10/01/2009

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