2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L0000006354

City-St-Zip: SARASOTA, FL 34241

Entity Name: HITCHENS QUALITY HOMES, L.L.C.

FILED Oct 22, 2007 Secretary of State

10/22/2007

Current Pr	incipal Place of Business:	New Principal Plac	New Principal Place of Business:	
1990 MAIN STE. 801 SARASOTA	ST A, FL 34236			
Current Ma	ailing Address:	New Mailing Addre	New Mailing Address:	
1990 MAIN STE. 801 SARASOTA	ST A, FL 34236			
FEI Number:	65-1012629 FEI Number Applied For se with s. 607.193(2)(b), F.S., the limited liab		Certificate of Status Desired ()	
	Address of Current Registered Age		of New Registered Agent:	
1990 MAIN STE. 801 SARASOTA	A, FL 34236 US named entity submits this statement fo	or the purpose of changing its register	red office or registered agent, or both	
SIGNATUR	RE: RENEA M. GLENDINNING			
	Electronic Signature of Register	ed Agent	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM () Delete HITCHENS, RALPH 616 ARCON BLVD. SARASOTA, FL 34241	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete HITCHENS, ANDREW CHARLES 6816 ARCON BLVD SARASOTA, FL 34241	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	MGRM () Delete HITCHENS, KATHLEEN JOAN 6816 ARCON BLVD.	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: RENEA M. GLENDINNING CPA