2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L00000007903

Name:

Address:

City-St-Zip:

WILLIAMS, JOANN MRS.

WESLEY CHAPEL, FL 33543

5450 BRUCE B DOWNS BLVD #329

Entity Name: WHP INVESTMENTS L.L.C.

FILED Oct 23, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5450 BRUCE B DOWNS BLVD 329 WESLEY CHAPEL, FL 33543 **New Mailing Address: Current Mailing Address:** P O BOX 291275 TAMPA, FL 33687 FEI Number: 59-3666457 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WILLIAMS, BRIAN 5450 BRUCE B DOWNS BLVD WESLEY CHAPEL, FL 33543 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: BRIAN WILLIAMS Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete WILLIAMS, BRIAN K MR. Name: Name: 5450 BRUCE B DOWNS BLVD #329 Address: Address: City-St-Zip: WESLEY CHAPEL, FL 33543 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: WILLIAMS, MICHAEL R MR. Name: Address: 5450 BRUCE B DOWNS BLVD #329 Address: City-St-Zip: TAMPA, FL 33543 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition WILLIAMS, MONICA Q MS. Name: Name: 5450 BRUCE B DOWNS BLVD #329 Address: Address: City-St-Zip: TAMPA, FL 33543 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Name:

Address:

City-St-Zip:

SIGNATURE: MICHAEL R. WILLIAMS MGRM 10/23/2005