

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L01000003361

Entity Name: DESMOND LILY, LLC

FILED  
Sep 19, 2007  
Secretary of State

**Current Principal Place of Business:**

1288 W. FAIRBANKS AVE.  
WINTER PARK, FL 32789

**New Principal Place of Business:**

**Current Mailing Address:**

1288 W. FAIRBANKS AVE.  
WINTER PARK, FL 32789

**New Mailing Address:**

FEI Number: 59-3705046      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:**

WOODS, JONATHAN D ESQ  
425 WEST COLONIAL DRIVE  
SUITE 204  
ORLANDO, FL 32804 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: JONATHAN WOODS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ROBB, VALERIE  
Address: 1288 W FAIRBANKS AVENUE  
City-St-Zip: WINTER PARK, FL 32789

Title: MGR ( ) Delete  
Name: HAMILTON, ANGELIQUE  
Address: 1288 W FAIRBANKS AVENUE  
City-St-Zip: WINTER PARK, FL 32789

Title: MGR ( ) Delete  
Name: FRASE, CHARMANE  
Address: 1288 W FAIRBANKS AVENUE  
City-St-Zip: WINTER PARK, FL 32789

Title: MGR ( ) Delete  
Name: COCHRANE, HOWARD  
Address: 1288 W FAIRBANKS AVENUE  
City-St-Zip: WINTER PARK, FL 32789

**ADDITIONS/CHANGES:**

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

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

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

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: VALERIE ROBB

MGR

09/19/2007

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