

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L01000003519

Entity Name: XYZ OF MARTIN COUNTY, LLC

FILED
Oct 14, 2009
Secretary of State

Current Principal Place of Business:

7225 S.E. GOMEZ AVE.
HOBE SOUND, FL 33455

New Principal Place of Business:

Current Mailing Address:

800 SE MONTEREY CMS BLVD
200
STUART, FL 34996

New Mailing Address:

FEI Number: 02-0605456 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:

CARMODY, JOHN T JR.
800 S.E.MONTEREY COMMONS BLVD., STE. 200
STUART, FL 34996 US

Name and Address of New Registered Agent:

CARMODY, JOHN T
800 S.E.MONTEREY COMMONS BLVD
200
STUART, FL 34996 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: JOHN CARMODY

10/14/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CORMODY, JOHN T
Address: 800 SE MONTEREY COMMONS BLVD #200
City-St-Zip: STUART, FL 34996

Title: MGRM () Delete
Name: GANS, FLORENCE
Address: 709 VAN THOMAS DR
City-St-Zip: RALEIGH, NC 27615

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CARMODY, JOHN T
Address: 800 SE MONTEREY COMMONS BLVD #200
City-St-Zip: STUART, FL 34996

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: JOHN CARMODY

MGRM

10/14/2009

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