

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L01000012633

FILED
Mar 18, 2005
Secretary of State

Entity Name: R.E.A.L. PARTNERS REAL ESTATE BROKERAGE LLC

Current Principal Place of Business:

350 SOUTH COUNTY ROAD
SUITE 201
PALM BEACH, FL 33480 US

New Principal Place of Business:

Current Mailing Address:

350 SOUTH COUNTY ROAD
SUITE 201
PALM BEACH, FL 33480 US

New Mailing Address:

FEI Number: 65-1125635 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

W. LAWRENCE LENEVE
350 SOUTH COUNTY RD
SUITE 201
PALM BEACH, FL 33480 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: W. LAWRENCE LENEVE

03/18/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: LENEVE, W. LAWRENCE
Address: 350 SOUTH COUNTY ROAD
City-St-Zip: PALM BEACH, FL 33480 US

Title: MGRM (X) Delete
Name: WELLS, GENIUS
Address: 350 S. COUNTY ROAD, SUITE 201
City-St-Zip: PALM BEACH, FL 33480

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LENEVE, W. LAWRENCE
Address: 350 SOUTH COUNTY ROAD
City-St-Zip: PALM BEACH, FL 33480 US

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

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.

SIGNATURE: W. LAWRENCE LENEVE

MGR

03/18/2005

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