2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L01000019367

Title:

Name:

Address:

City-St-Zip:

MGRM

BRANCH, JUSTIN M

1718 DESTINO COURT

PORT ORANGE, FL 32128

() Delete

Entity Name: BRANCH PROPERTY GROUP, LLC

FILED Oct 19, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4191 DAIRY COURT SUITE A1 PORT ORANGE, FL 32129 **New Mailing Address: Current Mailing Address:** 345 CLYDE MORRIS BLVD STE 460 ORMOND BEACH, FL 32174 FEI Number: 50-0002863 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: E ROBERT BRANCH III, CHFC, CFP® E ROBERT BRANCH III, CHFC, CFP 345 CLYDE MORRIS BLVD 345 CLYDE MORRIS BLVD 460 460 ORMOND BEACH, FL 32174 US ORMOND BEACH, FL 32174 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: E. ROBERT BRANCH III 10/19/2009 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete BRANCH, JR, ELMER R Name: Name: 938 CANALVIEW BVLD Address: Address: City-St-Zip: PORT ORANGE, FL 32129 City-St-Zip: Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: BRANCH, III, ELMER R CFPϿ1/2 Name: BRANCH, III, ELMER R CFP Address: 345 CLYDE MORRIS BLVD STE 460 Address: 345 CLYDE MORRIS BLVD STE 460 City-St-Zip: PORT ORANGE, F 32128 City-St-Zip: PORT ORANGE, F 32128

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.

Title:

Name:

Address:

City-St-Zip:

() Change () Addition

SIGNATURE: E ROBERT BRANCH III MRGM 10/19/2009