

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L02000003638

Entity Name: FLORIDA REALTY, LLC

FILED  
Oct 21, 2008  
Secretary of State

**Current Principal Place of Business:**

20545 INDEPENDENCE BLVD  
SUITE A  
GROVELAND, FL 34736

**New Principal Place of Business:**

**Current Mailing Address:**

16791 SE HWY 42  
WEIRSDALE, FL 32195

**New Mailing Address:**

FEI Number: 73-1628153      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

DE MAN, TIMOTHY P  
16791 SE HWY 42  
WEIRSDALE, FL 32195 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: TIMOTHY P DE MAN

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: DE MAN, TIMOTHY P  
Address: 16791 SE HWY 42  
City-St-Zip: WEIRSDALE, FL 32195

Title: MGR (X) Delete  
Name: BUKEY, JOE  
Address: 10845 ISLAND GROVE RD  
City-St-Zip: CLERMONT, FL 34711

Title: MGR ( ) Delete  
Name: DUGDALE, JURDY  
Address: 691 E GRAND AVE  
City-St-Zip: CLERMONT, FL 34711

Title: MGRM ( ) Delete  
Name: DE MAN, TRINIDAD G  
Address: 16791 SE HWY 42  
City-St-Zip: WEIRSDALE, FL 32195

**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: TIMOTHY P DE MAN

MGRM

10/21/2008

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