

# 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L02000026982

FILED  
Mar 21, 2005  
Secretary of State

Entity Name: SHOREWALKER HOMES LLC

**Current Principal Place of Business:**

777 EAST ATLANTIC AVENUE, SUITE Z #250  
DELRAY BEACH, FL 33483

**New Principal Place of Business:**

**Current Mailing Address:**

777 EAST ATLANTIC AVENUE, SUITE Z #250  
DELRAY BEACH, FL 33483

**New Mailing Address:**

1613 REDGRAVE RD  
KNOXVILLE, TN 37922

FEI Number: 05-0535558      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:**

CORPORATE CREATIONS NETWORK INC.  
941 FOURTH STREET  
MIAMI BEACH, FL 33139      US

**Name and Address of New Registered Agent:**

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: FRANK CAMMARARATA

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR      ( ) Delete  
Name: DAWES, JACQUELINE A  
Address: 777 EAST ATLANTIC AVENUE, SUITE Z #250  
City-St-Zip: DELRAY BEACH, FL 33483

Title: S      ( ) Delete  
Name: DAWES, JONATHAN  
Address: 777 E. ATLANTIC AVE. Z-250  
City-St-Zip: DELRAY BEACH, FL 33483

**ADDITIONS/CHANGES:**

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

Title: MGRM      (X) Change ( ) Addition  
Name: DAWES, JONATHAN  
Address: 777 E. ATLANTIC AVE. Z-250  
City-St-Zip: DELRAY BEACH, FL 33483

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: JACQUELINE DAWES

MGR

03/21/2005

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