

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L02000027155

FILED
Oct 22, 2009
Secretary of State

Entity Name: HALF VENTURES OF FLORIDA, LLC

Current Principal Place of Business:

C/O DANIEL HUGHES,P.A.
4245 N OCEAN DRIVE
LAUDERDALE BY THE SEA, FL 33308

New Principal Place of Business:

Current Mailing Address:

C/O DANIEL HUGHES,P.A.
5100 N OCEAN BLVD #205
LAUDERDALE BY THE SEA, FL 33308

New Mailing Address:

FEI Number: 01-0749290 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:

HUGHES, M. DANIEL P.A.
3000 NORTH FEDERAL HIGHWAY BLDG 2 SOUTH
STE. 200
FORT LAUDERDALE, FL 33306 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: DANIEL HUGHES

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: PD () Delete
Name: ARKER, MICHAEL I
Address: 5100 N. OCEAN BLVD (205)
City-St-Zip: FT LAUDERDALE, FL 33300

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

Title: VD () Delete
Name: MATISON, TAMARA
Address: 12240 PECAN FOREST DRIVE
City-St-Zip: DALLAS, TX 75230

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

Title: SD () Delete
Name: HAMILTON, JAMES
Address: 800 CARRIAGE CT
City-St-Zip: SOUTHLAKE, TX 76092

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

Title: TD () Delete
Name: DILLON PARTNERSHIP LLC
Address: 509 BRYON COURT
City-St-Zip: IRVING, TX 75038

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: MICHAEL ARKER

PD

10/22/2009

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