2007 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED

2007 APR 23 AM 10:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L02000029219

1. Entity Name
551 EAST PALMETTO, LLC

04132007 REIN-LLC CR2E101 (1/07)

Principal Place of Business	Mailing Address
1177 GEORGE BUSH BOULEVARD SUITE 100 DELRAY BEACH, FL 33483	1177 GEORGE BUSH BOULEVARD SUITE 100 DELRAY BEACH, FL 33483

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
595 S. Federal Highway	Same
Suite, Apt. #, etc.: Suite 600	Suite, Apt. #, etc.: Same
City & State: Boca Raton, FL	City & State: Same
Zip: 33432 Country: USA	Zip: 33432 Country: USA

4. FEI Number: 74-3072174 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LAW OFFICE OF JEFFREY L. GREENBERG, P.A. 4800 NORTH FEDERAL HIGHWAY SUITE 304D BOCA RATON, FL 33431	Name: Greenberg & Strelitz, P.A. Street Address (P.O. Box Number is Not Acceptable): 2500 N. Military Trail Suite 235 City: Boca Raton FL Zip Code: 33431

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Herbert Strelitz, VP for Greenberg & Strelitz, P.A. DATE: 4/17/07
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $200.00

Make check payable to Florida Department of State

9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR 551 EAST PALMETTO HOLDING, LLC 1177 GEORGE BUSH BOULEVARD DELRAY BEACH, FL 33483	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 595 S. Federal Highway, Suite 600 Boca Raton, FL 33432
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 700101768437 05/03/07--01006--011 **400.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition REINSTATEMENT 06-07
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: [signature] 4/16/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #