

FILED

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

2007 APR 23 AM 10:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L02000029247					
1. Entity Name 551 EAST PALMETTO HOLDING, LLC					
Principal Place of Business 1177 GEORGE BUSH BOULEVARD SUITE 100 DELRAY BEACH, FL 33483 US			Mailing Address 1177 GEORGE BUSH BOULEVARD SUITE 100 DELRAY BEACH, FL 33483 US		
2. Principal Place of Business - No P.O. Box # 595 S. Federal Highway		3. Mailing Address Same			
Suite, Apt. #, etc. Suite 600		Suite, Apt. #, etc. Same			
City & State Boca Raton, FL		City & State Same		4. FEI Number 20-0964982	
Zip 33432		Country USA		Country Same	
6. Name and Address of Current Registered Agent LAW OFFICE OF JEFFREY L. GREENBERG, P.A. 4800 NORTH FEDERAL HIGHWAY SUITE 304D BOCA RATON, FL 33431				7. Name and Address of New Registered Agent 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 <u>Jeffrey L. Greenberg, P.A.</u> 4/17/07 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>					
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 DIAMOND, GERALD 1177 GEORGE BUSH BOULEVARD DELRAY BEACH, FL 33483		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 595 S. Federal Highway, Suite 600 Boca Raton, FL 33432	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 400101758384 05/08/07--01006--011 **400.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition REINSTATEMENT 06-07	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: <u>Jeffrey L. Greenberg</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			Date <u>4/16/07</u> Daytime Phone #		