2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
May 21, 2009
Secretary of State

DOCUMENT# L02000029511

Entity Name: ACCURATE HOLDINGS, LLC

Current Principal Place of Business:

273 SW MORRELLS COURT
SUITE 102
LAKE CITY, FL 32024

New Principal Place of Business:

4114 W US HWY 90
LAKE CITY, FL 32024

Current Mailing Address:

273 SW MORRELLS COURT
LAKE CITY, FL 32024

New Mailing Address:

4114 W US HWY 90
LAKE CITY, FL 32024

FEI Number: 71-0912510 **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:

BOWEN, LAWRENCE D
273 SW MORRELLS COURT
SUITE 102
LAKE CITY, FL 32024 US

Name and Address of New Registered Agent:

BOWEN, LAWRENCE D
4114 W US HWY 90
LAKE CITY, FL 32024 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: LAWRENCE BOWEN 05/21/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: BOWEN, HELEN G
Address: 273 SW MORRELLS CT
City-St-Zip: LAKE CITY, FL 32024

Title: MGR ( ) Delete
Name: BOWEN, LAWRENCE
Address: 273 SW MORRELLS CT
City-St-Zip: LAKE CITY, FL 32024

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: BOWEN, HELEN G
Address: 4114 W US HWY 90
City-St-Zip: LAKE CITY, FL 32024

Title: MGR (X) Change ( ) Addition
Name: BOWEN, LAWRENCE
Address: 4114 W US HWY 90
City-St-Zip: LAKE CITY, FL 32024

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: LAWRENCE BOWEN OWNE 05/21/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date