2004 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 07, 2004
Secretary of State

DOCUMENT# L02000029936

Entity Name: COLLEGE PARK FINANCIAL GROUP, LLC

Current Principal Place of Business:

715 MAXWELL ST.
ORLANDO, FL 32804

New Principal Place of Business:

1727 WEEKS AVE
ORLANDO, FL 32806

Current Mailing Address:

715 MAXWELL ST.
ORLANDO, FL 32804

New Mailing Address:

1727 WEEKS AVE
ORLANDO, FL 32806

FEI Number: 54-2081852 **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:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete
Name: HOFFMAN, BRIAN
Address: 715 MAXWELL ST.
City-St-Zip: ORLANDO, FL 32804

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: HOFFMAN, BRIAN
Address: 1727 WEEKS AVE
City-St-Zip: ORLANDO, FL 32806

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: BRIAN HOFFMANN CEO 10/07/2004

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