2006 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Nov 20, 2006
Secretary of State

DOCUMENT# L02000032556

Entity Name: TREASURE HOMES, L.L.C.

Current Principal Place of Business:

12443 SAN JOSE BLVD., #404
JACKSONVILLE, FL 32223

New Principal Place of Business:

12443 SAN JOSE BLVD.
404
JACKSONVILLE, FL 32223

Current Mailing Address:

12443 SAN JOSE BLVD., #404
JACKSONVILLE, FL 32223

New Mailing Address:

FEI Number: 04-3731461 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

RASO, ANTHONY
12443 SAN JOSE BLVD.
404
JACKSONVILLE, FL 32223 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: ANTHONY RASO

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title:	MGRM	( ) Delete
Name:	RASO, ANTHONY	
Address:	12443 SAN JOSE BLVD., #404	
City-St-Zip:	JACKSONVILLE, FL 32223	
Title:	MGRM	( ) Delete
Name:	RASO, ANTHONY	
Address:	12443 SAN JOSE BLVD., #404	
City-St-Zip:	JACKSONVILLE, FL 32223	
Title:	MGRM	( ) Delete
Name:	BLAIR, VALERIE	
Address:	1173 HIDEAWAY DRIVE NORTH	
City-St-Zip:	JACKSONVILLE, FL 32259	
Title:	MGRM	( ) Delete
Name:	BLAIR, VALERIE	
Address:	1173 HIDEAWAY DRIVE NORTH	
City-St-Zip:	JACKSONVILLE, FL 32259	

ADDITIONS/CHANGES:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: VALERIE BLAIR MGRM 11/20/2006

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