

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000002713

Entity Name: FOGARTY HOUSE, LLC

FILED  
Nov 26, 2008  
Secretary of State

**Current Principal Place of Business:**

2615 PATTERSON AVENUE  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

18113 SW 93 AVE  
MIAMI, FL 33157

**New Mailing Address:**

FEI Number: 13-4266205

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

HUGHES, ERICA N  
500 FLEMING STREET  
KEY WEST, FL 33040 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: ERICA N HUGHES

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: HUGHES, GERARD WADE  
Address: 2615 PATTERSON AVENUE  
City-St-Zip: KEY WEST, FL 33040 US

Title: MGRM ( ) Delete  
Name: HUGHES, GEORGE A  
Address: 3574 NOAH'S ARK ROAD  
City-St-Zip: JONESBORO, GA 30236 US

Title: MGRM ( ) Delete  
Name: HUGHES, JOHN M  
Address: 18113 S.W. 93RD AVENUE  
City-St-Zip: MIAMI, FL 33157 US

**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:

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: JOHN M HUGHES

MGRM

11/26/2008

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