2005 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 27, 2005
Secretary of State

DOCUMENT# L03000007138

Entity Name: EDWARD D. ROWSEY, L.L.C.

Current Principal Place of Business:

8949 S.E. BRIDGE RD #184
HOBE SOUND, FL 33455

New Principal Place of Business:

478 TEQUESTA DRIVE
UNIT 102
TEQUESTA, FL 33469

Current Mailing Address:

8949 S.E. BRIDGE RD #184
HOBE SOUND, FL 33455

New Mailing Address:

478 TEQUESTA DRIVE
UNIT 102
TEQUESTA, FL 33469

FEI Number: 42-1585245 **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:

MCGOVERN, JOHN T
2425 PRESIDENTAL WAY #604
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

ROWSEY, EDWARD D
478 TEQUESTA DRIVE
UNIT 102
TEQUESTA, FL 33469 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: EDWARD ROWSEY 10/27/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: ROWSEY, EDWARD D
Address: 8949 S.E. BRIDGE ROAD, #184
City-St-Zip: HOBE SOUND, FL 33455 53

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: ROWSEY, EDWARD D
Address: 478 TEQUESTA DRIVE
City-St-Zip: TEQUESTA, FL 33469

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: EDWARD ROWSEY MGR 10/27/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date