2004 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000014536

Entity Name: CJK AQUARIUS, LLC

FILED Dec 22, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 514 WEST CENTRAL BLVD. 688 FLORIDA CENTRAL PARKWAY ORLANDO, FL 32801 LONGWOOD, FL 32750

Current Mailing Address: New Mailing Address:

P.O. BOX 2308 PO BOX 522250 ORLANDO, FL 32802 LONGWOOD, FL 32752

FFI Number: FEI Number Applied For (X) 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: Name and Address of New Registered Agent:

F & L CORP SANDERS, JOHN A ONE INDEPENDENT DRIVE ONE INDEPENDENT DRIVE **SUITE 1300 SUITE 1300** JACKSONVILLE, FL 32202 US JACKSONVILLE, FL 32202 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: JOHN A SANDERS 12/22/2004

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

() Delete Title: () Change (X) Addition

KINCHLA, MARK Name: Name: Address: Address: PO BOX 522250 City-St-Zip: City-St-Zip: LONGWOOD, FL 32752

Title: Title: MGRM () Change (X) Addition () Delete Name:

Name: ZAHN, RICHARD Address: Address: PO BOX 522250 City-St-Zip: City-St-Zip: LONGWOOD, FL 32752

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: MARK KINCHLA 12/22/2004