## 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L03000023645

Entity Name: INDIO GROUP LLC

FILED Jul 19, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6814 NW 13ST. 3435 MERRICK LANE

PLANTATION, FL 33313 MARGATE, FL 33063 US

Current Mailing Address: New Mailing Address:

6814 NW 13ST. 3435 MERRICK LANE PLANTATION, FL 33313 MARGATE, FL 33063

FEI Number: 33-1069037 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: Name and Address of New Registered Agent:

WILLIAMS, OMAR H
5641 NW 13 ST.
LAUDERHILL, FL 33313 US
WILLIAMS, OMAR H
3435 MERRICK LANE
MARGATE, FL 33063 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: OMAR H WILLIAMS 07/19/2005

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS:

 Title:
 MGRM () Delete

 Name:
 WILLIAMS, OMAR H

 Address:
 5641 NW 13 ST.

 City-St-Zip:
 LAUDERHILL, FL 33313

Title: MGRM ( ) Delete
Name: WRIGHT, LORENZO F JR.

Address: 6814 NW 13 ST.
City-St-Zip: PLANTATION, FL 33313

 Title:
 MGRM () Delete

 Name:
 PURCELL, DARNELL A

 Address:
 6809 HENNEPIN BLVD.

 City-St-Zip:
 ORLANDO, FL 32818

Title: ( ) Delete

Name: Address: City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition Name: HOUCHIN, JEFFREY L Address: 178 WEST LAUREL DRIVE City-St-Zip: MARGATE, FL 33063 US

Title: MGRM (X) Change ( ) Addition

Name: WILLIAMS, OMAR H
Address: 3435 MERRICK LANE
City-St-Zip: MARGATE, FL 33063 US

Title: MGRM (X) Change ( ) Addition

Name: HOUCHIN, JENNIFER J Address: 178 WEST LAUREL DRIVE City-St-Zip: MARGATE, FL 33063 US

Title: MGRM ( ) Change (X) Addition

Name: WILLIAMS, LISA P Address: 3435 MERRICK LANE City-St-Zip: MARGATE, FL 33063 US

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: OMAR H WILLIAMS MGRM 07/19/2005