

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000027055

FILED
Jan 20, 2006
Secretary of State

Entity Name: SEWA R JOSHI PROPERTIES, LLC

Current Principal Place of Business:

5909 LAROSA LANE
APOLLO BEACH, FL 33572 US

New Principal Place of Business:

5909 ZAKI LANE
APOLLO BEACH, FL 33572 US

Current Mailing Address:

5909 LAROSA LANE
APOLLO BEACH, FL 33572 US

New Mailing Address:

5909 ZAKI LANE
APOLLO BEACH, FL 33572 US

FEI Number: 20-0106848 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

JOSHI, SURINDER R
5909 LAROSA LANE
APOLLO BEACH, FL 33572 US

Name and Address of New Registered Agent:

JOSHI, SURINDER R
5909 ZAKI LANE
APOLLO BEACH, FL 33572 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: SURINDER R JOSHI

01/20/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: JOSHI LIVING TRUST,
Address: 5909 LAROSA LANE
City-St-Zip: APOLLO BEACH, FL 33572 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: J & J ASSET MANAGEME, NT CORP
Address: 1802 N CARSON ST, SUITE 212-2969
City-St-Zip: CARSON CITY, NV 89701 US

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: ASHOK K JOSHI

MGRM

01/20/2006

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