2004 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L03000027099

1. Entity Name
CAROLINA PLACE FURNITURE GALLERIES, LLC

FILED
04 NOV 23 AM 10:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
2795 PETERS HWY FORT PIERCE, FL 34945 US	2795 PETERS HWY FORT PIERCE, FL 34945 US

11042004 - REIN-LLC CR2E101 (6/04)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / County: ST. LUCIE	Zip / County: ST. LUCIE

4. FEI Number: 20-0087031 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent:
~~MURPHY, SUSAN M~~
~~2400 S. OCEAN DR~~
~~FT. PIERCE, FL 34949~~

7. Name and Address of New Registered Agent:
Name: BEVERLY RAVEN
Street Address (P.O. Box Number is Not Acceptable): 1180 CARLTON CT A
City: FT PIERCE FL
State: Fl. Zip Code: 34949

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Beverly Raven DATE: 11-4-05
Signature, type or print name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After January 1, 2005, Fee will be $200.00

Make check payable to Florida Department of State

9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR MURPHY, SUSAN M 2400 S. OCEAN DR. FT. PIERCE, FL 34949	☒ Delete	Manager Beverly Raven 1180 Carlton Ct A FT Pierce Fla 34949	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM BOLICK, CHARLES B 311 4TH AVE. NW HICKORY, NC 28601	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM CRIBB, MELVIN B 8389 WILLOW BOTTOM RD HICKORY, NC 28602	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM GEE, DAVID B 3898 MATTINGLY DR. HICKORY, NC 28602	☐ Delete	600043550656 12/21/04--01004--020 **55.00	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM BOLICK, TIMOTHY R 724 10TH ST. BLVD NW HICKORY, NC 28601	☐ Delete	REINSTATEMENT DV	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify 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 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: [signature] 11-4-04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #