

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000027951

Entity Name: TIC 3501, LLC

FILED  
Nov 10, 2009  
Secretary of State

## Current Principal Place of Business:

505 SOUTH FLAGLER DRIVE  
SUITE 1010  
WEST PALM BEACH, FL 33401

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 85  
WEST PALM BEACH, FL 33402

## New Mailing Address:

FEI Number: 20-0124538      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:

JOHNSON, SCOTT A  
505 S. FLAGLER DRIVE, SUITE 1010  
WEST PALM BEACH, FL 33401      US

## Name and Address of New Registered Agent:

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: SCOTT A JOHNSON

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR      ( ) Delete  
Name: JOHNSON, RICHARD S JR  
Address: P.O. BOX 85  
City-St-Zip: WEST PALM BEACH, FL 33402

Title: MGR      ( ) Delete  
Name: JOHNSON, SCOTT A  
Address: P.O. BOX 85  
City-St-Zip: WEST PALM BEACH, FL 33402

Title: MGR      ( ) Delete  
Name: KOENIG, PATRICK C  
Address: P.O. BOX 85  
City-St-Zip: WEST PALM BEACH, FL 33402

Title: MGR      ( ) Delete  
Name: JOHNSON, RICHARD S  
Address: P. O. BOX 85  
City-St-Zip: WEST PALM BEACH, FL 33402

## ADDITIONS/CHANGES:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: SCOTT JOHNSON

MGR

11/10/2009

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