

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000029276

FILED
Oct 23, 2008
Secretary of State

Entity Name: DUANE L. PINNOCK, ATTORNEY & COUNSELOR AT LAW, PLLC

Current Principal Place of Business:

900 EAST OCEAN BLVD.
210-B
STUART, FL 34994 US

New Principal Place of Business:

200 S. BISCAYNE BLVD
2750
MIAMI, FL 33131 US

Current Mailing Address:

900 EAST OCEAN BLVD.
SUITE 210-B
STUART, FL 34994

New Mailing Address:

200 S. BISCAYNE BLVD
2750
MIAMI, FL 33131 US

FEI Number: 20-0151656 **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:

PINNOCK, DUANE L ESQ.
900 EAST OCEAN BLVD.
SUITE 210-B
STUART, FL 34994 US

Name and Address of New Registered Agent:

PINNOCK, DUANE L ESQ.
200 S. BISCAYNE BLVD
2750
MIAMI, FL 33131 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: DUANE L. PINNOCK

10/23/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PINNOCK, DUANE L MGRM
Address: 900 EAST OCEAN BLVD., SUITE 210-B
City-St-Zip: STUART, FL 34994 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PINNOCK, DUANE L MGRM
Address: 151 APALACHE LANE
City-St-Zip: JUPITER, FL 33458 US

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: DUANE L. PINNOCK

MGM

10/23/2008

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