

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000029791

Entity Name: BL HOMES LLC.

FILED
Jan 07, 2005
Secretary of State

Current Principal Place of Business:

360 LANGFORD DR
CHULUOTA, FL 32766

New Principal Place of Business:

240 WEST 7TH STREET
CHULUOTA, FL 32766

Current Mailing Address:

360 LANGFORD DR
CHULUOTA, FL 32766

New Mailing Address:

240 WEST 7TH STREET
CHULUOTA, FL 32766

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

LLEWELLYN, KREG
360 LANGFORD DR
CHULUOTA, FL 32766 US

Name and Address of New Registered Agent:

BESSETTE, MARK A
240 WEST 7TH STREET
CHULUOTA, FL 32766 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: MARK A. BESSETTE

01/07/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR (X) Delete
Name: LLEWELLYN, DONALD K
Address: 360 LANGFORD DR
City-St-Zip: CHULUOTA, FL 32766

Title: MGR () Delete
Name: BESSETTE, MARK A
Address: 240 WEST 7TH STEET
City-St-Zip: CHULUOTA, FL 32766

ADDITIONS/CHANGES:

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 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: MARK A. BESSETTE

MGR

01/07/2005

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