

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000034669

FILED
May 03, 2008
Secretary of State

Entity Name: HUNTER HARDWOODS, LLC

Current Principal Place of Business:

2901 SW 86 WAY
DAVIE, FL 33028

New Principal Place of Business:

4006 PIERCE ST.
HOLLYWOOD, FL 33021

Current Mailing Address:

PO BOX 550459
DAVIE, FL 33355

New Mailing Address:

4006 PIERCE ST.
HOLLYWOOD, FL 33021

FEI Number: 90-0109562 **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:

ARVESU, MANUEL M
201 ALHAMBRA CIR., STE. 502
CORAL GABLES, FL 33034 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: MANUEL M. ARVESU

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GOLDSTEIN, RONALD
Address: 10970 CAMERON G. #101
City-St-Zip: DAVIE, FL 33324

Title: MGRM (X) Delete
Name: GOLDSTEIN, ROBERT
Address: 2901 SW 86 WAY
City-St-Zip: DAVIE, FL 33328

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GOLDSTEIN, RONALD
Address: 4006 PIERCE ST.
City-St-Zip: HOLLYWOOD, FL 33021

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: RONALD GOLDSTEIN

MGR

05/03/2008

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