2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000049037

Entity Name: MADISON DEVELOPMENT GROUP, LLC

FILED Oct 19, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

974 RAVINE ROAD N 445 ST. RD 13 N SUITE 26-220 SWITZERLAND, FL 32259 JACKSONVILLE, FL 32259

Current Mailing Address: New Mailing Address:

445 ST. RD 13 N SUITE 26-220 974 RAVINE ROAD N SWITZERLAND, FL 32259 JACKSONVILLE, FL 32259

FEI Number: 47-0927119 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: Name and Address of New Registered Agent:

JORGENSEN, MIKE 8787 SOUTHSIDE BLVD 5609 JAX, FL 32256 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: MIKE JORGENSEN

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

MGR Title: (X) Change () Addition () Delete FONDA, BLAIR M FONDA, BLAIR M Name: Name: Address: 974 RAVINE ROAD N Address: 445 ST. RD 13 N SUITE 26-220

City-St-Zip: SWITZERLAND, FL 32259 City-St-Zip: JACKSONVILLE, FL 32259

Title: MGR () Delete Title: () Change () Addition

FONDA, CHARLES M Name: Name: Address: 836 EAGLE POINT DR. Address: City-St-Zip: ST. AUGUSTINE, FL 32092 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: BLAIR M FONDA 10/19/2006