2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000011402

Entity Name: MARCAN GROUP, LLC

Title:

Name:

Address:

City-St-Zip:

MGR

VILLARI, MARCO

4201 POINSETTIA DR.

() Delete

ST. PETERSBURG BEACH, FL 33706

FILED Oct 07, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 600 1ST AVE N SUITE 302 ST PETERSBURG BEACH, FL 33701 **Current Mailing Address: New Mailing Address:** 600 1ST AVE N SUITE 302 ST PETERSBURG BEACH, FL 33701 FEI Number: 20-0792512 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: HAJEK, MICHAEL W VILLARI, JOSEPH 5308 CÉNTRAL AVENUE 600 1ST AVENUE N STE 302 ST PETERSBURG, FL 33707 US US ST PETERSBURG, FL 33701 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: JOSEPH VILLARI 10/07/2005 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete VILLARI, JOSEPH Name: Name: Address: 4201 POINSETTIA DR Address: City-St-Zip: ST PETERSBURG BEACH, FL 33706 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: VILLARI, MONICA Name: Address: 4201 POINSETTIA DR Address: City-St-Zip: ST PETERSBURG BEACH, FL 33706 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.

Title:

Name:

Address:

City-St-Zip:

() Change () Addition

SIGNATURE: JOSEPH VILLARI MGRM 10/07/2005