

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000018273

Entity Name: RICHARDSON,RUNDEN LLC

FILED
Oct 16, 2007
Secretary of State

Current Principal Place of Business:

1648 SAND KEY ESTATES COURT
CLEARWATER BEACH, FL 33767

New Principal Place of Business:

1648 SAND KEY ESTATES COURT
CLEARWATER BEACH, FL 33767 US

Current Mailing Address:

P.O. BOX 43725
UPPER MONTCLAIR, NJ 07043

New Mailing Address:

1648 SAND KEY ESTATES COURT
CLEARWATER BEACH, FL 33767 US

FEI Number: 20-0869660 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:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: SPIEGEL & UTRERA

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: RICHARDSON, DAVID M
Address: 1648 SAND KEY ESTATES COURT
City-St-Zip: CLEARWATER BEACH, FL 33767

Title: ST (X) Delete
Name: RICHARDSON, DAVID M
Address: 1648 SAND KEY ESTATES COURT
City-St-Zip: CLEARWATER BEACH, FL 33767

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 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: DAVID M RICHARDSON

MGR

10/16/2007

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