

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000021674

Entity Name: CARMAC LLC

FILED
Sep 20, 2005
Secretary of State

Current Principal Place of Business:

13381 SW 29 CT.
DAVIE, FL 33330

New Principal Place of Business:

5722 FLAMINGO ROAD #325
DAVIE, FL 33330

Current Mailing Address:

13381 SW 29 CT.
DAVIE, FL 33330

New Mailing Address:

5722 FLAMINGO ROAD #325
DAVIE, FL 33330

FEI Number: FEI Number Applied For (X) 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:

MCNALLY, IAN
13381 SW 29 CT.
DAVIE, FL 33330 US

Name and Address of New Registered Agent:

MCNALLY, IAN
5722 FLAMINGO ROAD #325
DAVIE, FL 33330 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: IAN MCNALLY

09/20/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MCNALLY, IAN
Address: 13381 SW 29 CT.
City-St-Zip: DAVIE, FL 33330

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MCNALLY, IAN
Address: 5722 FLAMINGO ROAD #325
City-St-Zip: DAVIE, FL 33330

Title: MGRM () Change (X) Addition
Name: CARR, ANDREW
Address: 5722 FLAMINGO ROAD #325
City-St-Zip: DAVIE, FL 33330

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: IAN MCNALLY

MR

09/20/2005

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