2007 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Feb 15, 2007
Secretary of State

DOCUMENT# L04000022268

Entity Name: DARALES, L.L.C.

Current Principal Place of Business:

305 N.E. 1ST STREET
GAINESVILLE, FL 32601

New Principal Place of Business:

38333 CR 439
EUSTIS, FL 32736

Current Mailing Address:

305 N.E. 1ST STREET
GAINESVILLE, FL 32601

New Mailing Address:

PO BOX 181724
CASSELBERRY, FL 32718

FEI Number: 42-1623518 **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:

GARY S. EDINGER, P.A.
305 N.E. 1ST STREET
GAINESVILLE, FL 32601 US

Name and Address of New Registered Agent:

HOPKINS, LESLEIGH
38333 CR 439
EUSTIS, FL 32736 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: LESLEIGH HOPKINS 02/15/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: HOPKINS, LESLEIGH C
Address: 305 N.E. 1ST STREET
City-St-Zip: GAINESVILLE, FL 32601

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: HOPKINS, LESLEIGH C
Address: 38333 CR 439
City-St-Zip: EUSTIS, FL 32736

I hereby certify that the information supplied with this filing does not qualify for the 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: LESLEIGH HOPKINS MGM 02/15/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date