

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000024055

Entity Name: F & J DEVELOPERS, LLC

FILED
Oct 07, 2005
Secretary of State

Current Principal Place of Business:

7800 SOUTLAND BLVD, STE 109
ORLANDO, FL 32809

New Principal Place of Business:

7800 SOUTLAND BLVD, STE 109
109
ORLANDO, FL 32809

Current Mailing Address:

7800 SOUTLAND BLVD, STE 109
ORLANDO, FL 32809

New Mailing Address:

7800 SOUTLAND BLVD, STE 109
109
ORLANDO, FL 32809

FEI Number: 01-0811293 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:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: FRANCO SCALA

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

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

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

ADDITIONS/CHANGES:

Title: MR. () Change (X) Addition
Name: SCALA, FRANCO
Address: 7800 SOUTHLAND BLVD, SUITE 109
City-St-Zip: ORLANDO, FL 32809 US

Title: MR. () Change (X) Addition
Name: HEISTAND, JIM
Address: 7800 SOUTHLAND BLVD, SUITE 109
City-St-Zip: ORLANDO, FL 32809 US

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: FRANCO SCALA

MR

10/07/2005

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