

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000026242

Entity Name: LM INVESTMENT GROUP LLC

FILED
Mar 16, 2006
Secretary of State

Current Principal Place of Business:

9083 RUTLEDGE AVENUE
BOCA RATON, FL 33434

New Principal Place of Business:

1430 SW 17TH STREET
BOCA RATON, FL 33486

Current Mailing Address:

P.O. BOX 272267
BOCA RATON, FL 33427

New Mailing Address:

1430 SW 17TH STREET
BOCA RATON, FL 33486

FEI Number: 56-2450075

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, LAWRENCE
9083 RUTLEDGE AVENUE
BOCA RATON, FL 33434 US

Name and Address of New Registered Agent:

SMITH, LAWRENCE
1430 SW 17TH STREET
BOCA RATON, FL 33486 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: LAWRENCE SMITH

03/16/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SMITH, LAWRENCE
Address: P.O. BOX 272267
City-St-Zip: BOCA RATON, FL 33427

Title: MGR () Delete
Name: SMITH, MISAH
Address: P.O. BOX 272267
City-St-Zip: BOCA RATON, FL 33427

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SMITH, LAWRENCE
Address: 1430 SW 17TH STREET
City-St-Zip: BOCA RATON, FL 33486

Title: MGR (X) Change () Addition
Name: SMITH, MISAH
Address: 1430 SW 17TH STREET
City-St-Zip: BOCA RATON, FL 33486

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: MISAH SMITH

MGR

03/16/2006

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