2006 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 11, 2006
Secretary of State

DOCUMENT# L04000034307

Entity Name: AVIATORS DREAM LLC

Current Principal Place of Business:

2743 LYNDSCAPE STREET
ORLANDO, FL 32833 US

New Principal Place of Business:

2202 FLEET CIRCLE
ORLANDO, FL 32817 US

Current Mailing Address:

2743 LYNDSCAPE STREET
ORLANDO, FL 32833 US

New Mailing Address:

2202 FLEET CIRCLE
ORLANDO, FL 32817 US

FEI Number: 68-0585464 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARK, RICKY
2743 LYNDSCAPE STREET
ORLANDO, FL 32833 US

Name and Address of New Registered Agent:

MARK, RICKY
2202 FLEET CIRCLE
ORLANDO, FL 32817 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: RICKY A. MARK 10/11/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: MARK, DEBRA L
Address: 2743 LYNDSCAPE STREET
City-St-Zip: ORLANDO, FL 32833

Title: MGRM ( ) Delete
Name: MARK, RICKY
Address: 2743 LYNDSCAPE STREET
City-St-Zip: ORLANDO, FL 32833

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: MARK, DEBRA L
Address: 2202 FLEET CIRCLE
City-St-Zip: ORLANDO, FL 32817

Title: MGRM (X) Change ( ) Addition
Name: MARK, RICKY
Address: 2202 FLEET CIRCLE
City-St-Zip: ORLANDO, FL 32817

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: DEBRA L. MARK MGRM 10/11/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date