2008 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Dec 05, 2008
Secretary of State

DOCUMENT# L04000036943

Entity Name: WELLINGTON DEVELOPMENT, L.C.

Current Principal Place of Business:

4400 N. FEDERAL HIGHWAY
SUITE 408
BOCA RATON, FL 33431 US

New Principal Place of Business:

700 SANCTUARY DRIVE
BOCA RATON, FL 33431 US

Current Mailing Address:

4400 N. FEDERAL HIGHWAY
SUITE 408
BOCA RATON, FL 33431 US

New Mailing Address:

700 SANCTUARY DRIVE
BOCA RATON, FL 33431 US

FEI Number: 20-1134802 **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:

KAAN, VALERIE E
4400 N FEDERAL HWY
408
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

KAAN, VALERIE E
700 SANCTUARY DRIVE
BOCA RATON, FL 33431 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: VALERIE E. KAAN 12/05/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: KAAN, VALERIE E
Address: 4400 N FEDERAL HWY SUITE 408
City-St-Zip: BOCA RATON, FL 33431 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: KAAN, VALERIE E
Address: 700 SANCTUARY DRIVE
City-St-Zip: BOCA RATON, FL 33431 US

I hereby certify that the information supplied with this filing does not qualify 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: VALERIE E. KAAN MGRM 12/05/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date