2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000039677

Entity Name: HORIZON INVESTMENTS OF FLORIDA, L.L.C.

Current Principal Place of Business:	**New Principal Place of Business:**
12648 VICTORIA PLACE CIRCLE, APT 6106 ORLANDO, FL 32828	215 CELEBRATION PLACE 500 CELEBRATION, FL 34747

Current Mailing Address:	**New Mailing Address:**
12648 VICTORIA PLACE CIRCLE, APT 6106 ORLANDO, FL 32828	215 CELEBRATION PLACE 500 CELEBRATION, FL 34747

FEI Number: 42-1631697   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired (X)

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:	**Name and Address of New Registered Agent:**
BERMUDEZ, LUIS OMAR 12648 VICTORIA PLACE CIRCLE, APT 6106 ORLANDO, FL 32828 US	BERMUDEZ, LUIS O 9429 MYRTLE CREEK LANE 405 ORLANDO, FL 32832 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: LUIS O. BERMUDEZ   10/07/2005

        Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS: **ADDITIONS/CHANGES:**

Title:	MGRM ( ) Delete	Title:	MGRM (X) Change ( ) Addition
Name:	BERMUDEZ, LUIS OMAR	Name:	BERMUDEZ, LUIS O
Address:	12648 VICTORIA PLACE CIRCLE, APT 6106	Address:	9429 MYRTLE CREEK LANE #405
City-St-Zip:	ORLANDO, FL 32828	City-St-Zip:	ORLANDO, FL 32832

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: LUIS O. BERMUDEZ   MGRM   10/07/2005

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