

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000048509

Entity Name: BATEWOOD, LLC

FILED
Oct 05, 2006
Secretary of State

Current Principal Place of Business:

999 BRICKELL AVE.
SUITE 402
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

999 BRICKELL AVE.
SUITE 402
MIAMI, FL 33131

New Mailing Address:

FEI Number: 06-1728769

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BATES, THOMAS F MGR
1237 PLACETAS AVENUE
CORAL GABLES, FL 33146 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: THOMAS F. BATES

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BATES, THOMAS F
Address: 4105 PONCE DE LEON BLVD.
City-St-Zip: CORAL GABLES, FL 33146

Title: MGR () Delete
Name: BATES, SANDRA K
Address: 4105 PONCE DE LEON BLVD.
City-St-Zip: CORAL GABLES, FL 33146

Title: MGR () Delete
Name: BATES, THOMAS F
Address: 4105 PONCE DE LEON BLVD.
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BATES, THOMAS F
Address: 999 BRICKELL AVE., SUITE 402
City-St-Zip: MIAMI, FL 33131

Title: MGR (X) Change () Addition
Name: BATES, SANDRA K
Address: 999 BRICKELL AVE., SUITE 402
City-St-Zip: MIAMI, FL 33131

Title: MGR (X) Change () Addition
Name: BATES, THOMAS F
Address: 999 BRICKELL AVE., SUITE 402
City-St-Zip: MIAMI, FL 33131

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: THOMAS F. BATES

MGR

10/05/2006

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