

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000048517

FILED
Apr 10, 2006
Secretary of State

Entity Name: NORTHSHORE PLAZA INITIATIVES, LLC

Current Principal Place of Business:

2800 KISSIMMEE BAY CIRCLE
KISSIMMEE, FL 34744

New Principal Place of Business:

P.O. BOX 452151
KISSIMMEE, FL 34745

Current Mailing Address:

2800 KISSIMMEE BAY CIRCLE
KISSIMMEE, FL 34744

New Mailing Address:

P.O. BOX 452151
KISSIMMEE, FL 34745

FEI Number: 20-1426233 **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:

JOHNSON, SCOTT E
111 N. ORANGE AVENUE, SUITE 1200
MORAN & SHAMS, P.A.
ORLANDO, FL 32801 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: SCOTT JOHNSON BY TIM LARSON

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: D () Delete
Name: LARSON, TIMOTHY J
Address: 2800 KISSIMMEE BAY CIRCLE
City-St-Zip: KISSIMMEE, FL 34744

ADDITIONS/CHANGES:

Title: D (X) Change () Addition
Name: LARSON, TIMOTHY J
Address: P.O. BOX 452151
City-St-Zip: KISSIMMEE, FL 34745

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: TIMOTHY LARSON

MM

04/10/2006

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