2008 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 23, 2008
Secretary of State

DOCUMENT# L04000050351

Entity Name: SRS PROPERTIES LLC

Current Principal Place of Business:

934 EAST WADE STREET
TRENTON, FL 32693

New Principal Place of Business:

Current Mailing Address:

934 EAST WADE STREET
TRENTON, FL 32693

New Mailing Address:

FEI Number: 20-1352770 **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:

SMITH, BRAD
934 EAST WADE STREET
TRENTON, FL 32693 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: BRAD SMITH

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: SMITH, BRAD
Address: 934 EAST WADE STREET
City-St-Zip: TRENTON, FL 32693

Title: MGRM ( ) Delete
Name: ST. JOHN, RON
Address: 4951 NW 170 STREET
City-St-Zip: TRENTON, FL 32693

Title: MGRM ( ) Delete
Name: REED, NORVEL
Address: PO BOX 1111
City-St-Zip: TRENTON, FL 32693

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: RONALD STJOHN MRGM 10/23/2008

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