2005 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Dec 20, 2005
Secretary of State

DOCUMENT# L04000054230

Entity Name: 903 DUVAL ST. LIMITED LIABILITY COMPANY

Current Principal Place of Business:

757 LINWOOD AVE.
ATTN: MCGRATH
ST. PAUL, MN 55105

New Principal Place of Business:

Current Mailing Address:

757 LINWOOD AVE.
ATTN: MCGRATH
ST. PAUL, MN 55105

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CTCORPORATION SYSTEM

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: MCGRATH, ANN
Address: 757 LINWOOD AVE.
City-St-Zip: ST. PAUL, MN 55105

Title: MGRM ( ) Delete
Name: MCGRATH, JASON
Address: 757 LINWOOD AVE.
City-St-Zip: ST. PAUL, MN 55105

ADDITIONS/CHANGES:

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 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: ANN MCGRATH MGRM 12/20/2005

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