

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000054808

FILED
Sep 24, 2007
Secretary of State

Entity Name: RIVER ROAD ASSOCIATES #1, LLC

Current Principal Place of Business:

1710 RIVER ROAD, UNIT 1
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 550855
JACKSONVILLE, FL 32255

New Mailing Address:

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

MATTHEWS, JAMES M
1710 RIVER ROAD, UNIT 1
JACKSONVILLE, FL 32207 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: JAMES M MATTHEWS

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MATTHEWS, JAMES M
Address: 1710 RIVER ROAD, UNIT 1
City-St-Zip: JACKSONVILLE, FL 32207

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: DIR () Change (X) Addition
Name: STUCKEY, ALEX P
Address: 5638 COMMONWEALTH AVE
City-St-Zip: JACKSONVILLE, FL 32254

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: JAMES M MATTHEWS

MGRM

09/24/2007

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