2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
May 03, 2009
Secretary of State

DOCUMENT# L04000059421

Entity Name: ORLANDO EQUITY CLUB, LLC

Current Principal Place of Business:

17 N. LAWSONA BLVD
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

17 N. LAWSONA BLVD
ORLANDO, FL 32801

New Mailing Address:

FEI Number: 20-1472956 **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:

COHEN, TODD F
17 N. LAWSONA BLVD
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: TODD F COHEN

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: COHEN, TODD F
Address: 17 N. LAWSONA BLVD
City-St-Zip: ORLANDO, FL 32801

Title: MGRM ( ) Delete
Name: SHAFER, PAUL R TRUSTEE
Address: 1024 TERRACE BLVD
City-St-Zip: ORLANDO, FL 32803

Title: MGRM ( ) Delete
Name: SHAFER, MARY LOUISE TRUSTEE
Address: 1024 TERRACE BLVD
City-St-Zip: ORLANDO, FL 32803

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: TODD F COHEN MGR 05/03/2009

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