

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000060070

Entity Name: ALPINE GROUP, LLC

FILED
Mar 23, 2007
Secretary of State

Current Principal Place of Business:

2340 WINDCHIME DRIVE
JACKSONVILLE, FL 32224

New Principal Place of Business:

13509 PRINCESS KELLY DR
JACKSONVILLE, FL 32225

Current Mailing Address:

2340 WINDCHIME DRIVE
JACKSONVILLE, FL 32224

New Mailing Address:

13509 PRINCESS KELLY DR
JACKSONVILLE, FL 32225

FEI Number: 20-1565607

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALSON, WILLIAM B
2340 WINDCHIME DR
JACKSONVILLE, FL 32224 US

Name and Address of New Registered Agent:

ALSON, WILLIAM B
13509 PRINCESS KELLY DR
JACKSONVILLE, FL 32225 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: WILLIAM ALSON

03/23/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DONNELLAN, JOHN C JR.
Address: 8053 LAUREL TREE DRIVE
City-St-Zip: ORLANDO, FL 32819

Title: MGRM () Delete
Name: DRAGONETTI, JOHN V
Address: 8086 DICKIE DR.
City-St-Zip: JACKSONVILLE, FL 32216

Title: MGR () Delete
Name: ALSON, WILLIAM B
Address: 2340 WINDCHIME DR
City-St-Zip: JACKSONVILLE, FL 32224

ADDITIONS/CHANGES:

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

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

Title: MGR (X) Change () Addition
Name: ALSON, WILLIAM B
Address: 13509 PRINCESS KELLY DR
City-St-Zip: JACKSONVILLE, FL 32225

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: WILLIAM ALSON

MGR

03/23/2007

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