



2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L04000066947				<div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">FILED</div> <div style="margin-bottom: 10px;">2005 OCT 17 P 12:59</div> <div style="margin-bottom: 10px;">SECRETARY OF STATE TALLAHASSEE, FLORIDA</div> 	
1. Entity Name ROUND ISLAND PLANTATION, LLC		Principal Place of Business 2655 NORTH OCEAN DRIVE SUITE 400 SINGER ISLAND, FL 33404			
2. Principal Place of Business		Mailing Address 2655 NORTH OCEAN DRIVE SUITE 400 SINGER ISLAND, FL 33404			
Suite, Apt. #, etc. 310		3. Mailing Address 3540 Forest Hill Blvd Suite, Apt. #, etc. #203			
City & State		City & State W Palm Beach, FL			
Zip		Country		4. FEI Number 20-1629315	
Zip 33406		Country		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent ARMOUR, ALAN I II 1645 PALM BEACH LAKES BLVD. SUITE 1200 WEST PALM BEACH, FL 33401			7. Name and Address of New Registered Agent Name George W Heaton Street Address (P.O. Box Number is Not Acceptable) 2655 No Ocean Drive #310 City Singer Island FL Zip Code 33404		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>George W Heaton</u> (NOTE: Registered Agent signature required when reinstating) DATE 10/13/05					
FILE NOW!!! FEE IS \$150.00 After January 1, 2006, Fee will be \$200.00		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	managing member <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition LG Turtle Cove LLC 2655 No Ocean Dr # 310 Singer Island, FL 33404	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	managing member <input type="checkbox"/> Change <input type="checkbox"/> Addition SFF Turtle Cove LLC 1060 SW 19th St Boca Raton, FL 33486	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	600060688500 <input type="checkbox"/> Change <input type="checkbox"/> Addition 10/17/05--01072--010 **150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	REINSTATEMENT <input type="checkbox"/> Change <input type="checkbox"/> Addition AL 05	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
11. I hereby certify that the information supplied with this filing does not qualify 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 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: <u>George W Heaton</u>		SIGNATURE: <u>George W Heaton</u>		Date 10/13/05 5218335700	