2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000067138

Entity Name: DAMARI HOMES, LLC

City-St-Zip:

WELLINGTON, FL 33467

FILED Oct 25, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 11440 PARADISE COVE LANE WELLINGTON, FL 33467 **Current Mailing Address: New Mailing Address:** 11440 PARADISE COVE LANE WELLINGTON, FL 33467 FEI Number: 20-1603634 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: Name and Address of New Registered Agent: GORDON, REBECCA 11440 PARADISE COVE LANE WELLINGTON, FL 33467 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: REBECCA GORDON Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete GORDON, REBECCA Name: Name: Address: 11440 PARADISE COVE LANE Address: City-St-Zip: WELLINGTON, FL 33467 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: GORDON, DAMIA Name: Address: 11440 PARADISE COVE LANE Address: City-St-Zip: WELLINGTON, FL 33467 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition GORDON, DAMEON Name: Name: 11440 PARADISE COVE LANE Address: Address:

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.

City-St-Zip:

SIGNATURE: REBECCA GORDON MGRM 10/25/2008