2005 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Sep 19, 2005
Secretary of State

DOCUMENT# L04000074321

Entity Name: COUNTY LINE NATIVE NURSERY LLC

Current Principal Place of Business:

4210 COUNTY LINE ROAD
LAKELAND, FL 33811

New Principal Place of Business:

Current Mailing Address:

4210 COUNTY LINE ROAD
LAKELAND, FL 33811

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MOZDZER, WENDY B
4210 COUNTY LINE ROAD
LAKELAND, FL 33811 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: WENDY B. MOZDZER

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: MOZDZER, WENDY B
Address: 4210 COUNTY LINE ROAD
City-St-Zip: LAKELAND, FL 33811

Title: MGR ( ) Delete
Name: MOZDZER, RICHARD J
Address: 4210 COUNTY LINE ROAD
City-St-Zip: LAKELAND, FL 33811

ADDITIONS/CHANGES:

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 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 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: WENDY B. MOZDZER MGR 09/19/2005

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