

# 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000088690

Entity Name: ADF PROPERTIES, LLC

FILED  
Oct 12, 2005  
Secretary of State

## Current Principal Place of Business:

7228 CYPRESS COVE RD  
JACKSONVILLE, FL 32244

## New Principal Place of Business:

4625 WRICO DRIVE  
JACKSONVILLE, FL 32209

## Current Mailing Address:

P. O. BOX 23084  
JACKSONVILLE, FL 32244

## New Mailing Address:

P. O. BOX 12276  
JACKSONVILLE, FL 32209

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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:

BUCKMAN, BERNICE  
7228 CYPRESS COVE RD  
JACKSONVILLE, FL 32244 US

## Name and Address of New Registered Agent:

BUCKMAN, BERNICE  
4625 WRICO DRIVE  
JACKSONVILLE, FL 32209 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: BERNICE BUCKMAN

10/12/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MEMB ( ) Change (X) Addition  
Name: BUCKMAN, BERNICE  
Address: 4625 WRICO DRIVE  
City-St-Zip: JACKSONVILLE, FL 32209

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: BERNICE BUCKMAN

MEMB

10/12/2005

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