2007 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Aug 22, 2007
Secretary of State

DOCUMENT# L04000089328

Entity Name: PROMISE LAND INDUSTRIES, LLC

Current Principal Place of Business:

8560 N. SHERMAN CIRCLE, STE. 206
MIRAMAR, FL 33025

New Principal Place of Business:

Current Mailing Address:

8560 N. SHERMAN CIRCLE, STE. 206
MIRAMAR, FL 33025

New Mailing Address:

FEI Number: 43-2068615 **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:

LIBAND, ADRIAN
4466 N.W. 18 DR.
PEMBROKE PINES, FL 33024 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: ADRIAN LIBAND
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: CUMMINGS, DARRYL
Address: 2641 HURON WAY
City-St-Zip: MIRAMAR, FL 33025

Title: MGR ( ) Delete
Name: EDWARDS, ANDRE
Address: 608 NW 108TH TERRACE
City-St-Zip: HOLLYWOOD, FL 33026

Title: MGRM ( ) Delete
Name: WILLIAMS, LEIGHTON
Address: 17092 NW 10TH STREET
City-St-Zip: PEMBROKE PINES, FL 33028

Title: MGR ( ) Delete
Name: PLOCHE, BEAVEN
Address: 8560 N. SHERMAN CIRCLE, STE. 206
City-St-Zip: MIRAMAR, FL 33025

Title: MGRM ( ) Delete
Name: CUMMINGS, STEPHEN
Address: 2641 HURON WAY
City-St-Zip: MIRAMAR, FL 33025

Title: MGRM ( ) Delete
Name: BROWN, THEODORE
Address: 1840 NW 170TH STREET
City-St-Zip: OPA LOCKA, FL 33056

ADDITIONS/CHANGES:

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

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

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

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

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 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: BEAVEN PLOCHE MGR 08/22/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date