

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000010221

Entity Name: BING ENTERPRISES, LLC

FILED
Mar 26, 2007
Secretary of State

Current Principal Place of Business:

4564 ROSEWOOD AVE.
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

4564 ROSEWOOD AVE.
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: FEI Number Applied For (X) 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:

ALBERTELLI & ASSOCIATES, P.C.
5200 BELFORT RD, SUITE 250
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

ALTMAN, CHANDLER T MGR
4564 ROSEWOOD AVE
JACKSONVILLE, FL 32207 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: CHANDLER ALTMAN

03/26/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ALTMAN, MARIANNE M
Address: 4564 ROSEWOOD AVE.
City-St-Zip: JACKSONVILLE, FL 32207

Title: MGR () Delete
Name: ALTMAN, CHANDLER T
Address: 4564 ROSEWOOD AVE.
City-St-Zip: JACKSONVILLE, FL 32207

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 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: CHANDLER ALTMAN

MGR

03/26/2007

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