

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000015888

FILED
Mar 27, 2007
Secretary of State

Entity Name: VILLAS AT FORTUNE COVE, LLC

Current Principal Place of Business:

2015 13TH STREET
SAINT CLOUD, FL 34769

New Principal Place of Business:

4834 LILLIAN BLACK ROAD
SAINT CLOUD, FL 34771

Current Mailing Address:

2015 13TH STREET
SAINT CLOUD, FL 34769

New Mailing Address:

4834 LILLIAN BLACK ROAD
SAINT CLOUD, FL 34771

FEI Number: 26-0106396 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

FALOH, RICARDO M
4834 LILLIAN BLACK ROAD
SAINT CLOUD, FL 34771 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: RICARDO M. FALOH

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FALOH, RICARDO M
Address: 4834 LILLIAN BLACK ROAD
City-St-Zip: SAINT CLOUD, FL 34771

Title: MGRM () Delete
Name: CROSS, WILLIAM H
Address: 601 NORTH FERN CREEK AVENUE
City-St-Zip: ORLANDO, FL 32803

Title: MGRM () Delete
Name: MERRIAM, RYBURN
Address: 601 NORTH FERN CREEK AVENUE
City-St-Zip: ORLANDO, FL 32803

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FALOH, RICARDO M
Address: 4834 LILLIAN BLACK ROAD
City-St-Zip: SAINT CLOUD, FL 32771

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: RICARDO M. FALOH

MGRM

03/27/2007

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