

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000016577

Entity Name: EASTERN COVE 42, LLC

FILED  
Oct 11, 2007  
Secretary of State

**Current Principal Place of Business:**

174 WATERCOLOR WAY  
SUITE 306  
SANTA ROSA BEACH, FL 32459

**New Principal Place of Business:**

**Current Mailing Address:**

174 WATERCOLOR WAY  
SUITE 306  
SANTA ROSA BEACH, FL 32459

**New Mailing Address:**

FEI Number: 20-2384723      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:**

**Name and Address of New Registered Agent:**

BURKE, M. TODD ESQ  
215 GRAND BOULEVARD STE. 101  
DESTIN, FL 32550 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: CLIFFORD A RUDEN

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WRIGHT, E. ALLEN  
Address: 6955 BRIXTON PLACE  
City-St-Zip: SUWANEE, GA 30024

Title: MGRM ( ) Delete  
Name: WRIGHT, WILLIAM A  
Address: 680 KNAPPS HIGHWAY  
City-St-Zip: FAIRFIELD, CT 06825

Title: MGRM ( ) Delete  
Name: RUDEN, CLIFFORD A  
Address: 174 WATERCOLOR WAY #306  
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: MGRM ( ) Delete  
Name: RUDEN, GEORGE B  
Address: 1219 WYNFORD COLONY  
City-St-Zip: MARIETTA, GA 30064

**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:

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: CLIFFORD A RUDEN

MGRM

10/11/2007

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