## 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L05000020252

Entity Name: HTM CHARTERS LLC

Address:

City-St-Zip:

P.O. BOX 2052

PALM BEACH, FL 33480 US

FILED Sep 25, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 32 SHADY LANE TEQUESTA, FL 33469 US **Current Mailing Address: New Mailing Address:** 32 SHADY LANE TEQUESTA, FL 33469 US FEI Number: 20-2401788 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: MAHONEY, WHEATON 32 SHADY LANE TEQUESTA, FL 33469 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: WHEATON MAHONEY Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete MAHONEY, WHEATON Name: Name: Address: 32 SHADY LANE Address: City-St-Zip: TEQUESTA, FL 33469 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: MAHONEY, MARY Name: Address: 351 WORTH AVENUE Address: City-St-Zip: PALM BEACH, FL 33480 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition DIMEO, TERESA Name: Name: 25 LORING AVENUE Address: Address: City-St-Zip: PROVIDENCE, RI 02906 US City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition RYAN, PATRICIA Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: WHEATON MAHONEY MM 09/25/2007