

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000021649

FILED
Apr 10, 2007
Secretary of State

Entity Name: THE DEVOE APARTMENTS, LLC

Current Principal Place of Business:

233 5TH STREET N.
ST. PETERSBURG, FL 33701

New Principal Place of Business:

205 5TH STREET N
ST. PETERSBURG, FL 33701

Current Mailing Address:

2032 MASSACHUSETTS AVE NE
ST. PETERSBURG, FL 33703

New Mailing Address:

205 5TH STREET N.
ST. PETERSBURG, FL 33701

FEI Number: 86-1132592 **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:

CRANE, BRAGG C
2032 MASSACHUSETTS AVE NE
ST. PETERSBURG, FL 33703 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: BRAGG CRANE

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGR () Delete
Name: CRANE, BRAGG C
Address: 2032 MASSACHUSETTS AVE NE
City-St-Zip: ST. PETERSBURG, FL 33703

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

Title: MGR () Delete
Name: RUDDOCK, KENNETH
Address: 2032 MASSACHUSETTS AVE NE
City-St-Zip: ST. PETERSBURG, FL 33703

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: BRAGG CRANE

MM

04/10/2007

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