

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000025771

FILED
Sep 30, 2006
Secretary of State

Entity Name: CANDELA PROPERTIES LLC

Current Principal Place of Business:

19313 SEA MIST LONE
LUTZ, FL 33558

New Principal Place of Business:

19313 SEA MIST LANE
LUTZ, FL 33558

Current Mailing Address:

19313 SEA MIST LONE
LUTZ, FL 33558

New Mailing Address:

19313 SEA MIST LANE
LUTZ, FL 33558

FEI Number: 86-1133658 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:

GULICK, LARRY E
19313 SEA MIST LONE
LUTZ, FL 33558 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: LARRY E. GULICK

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GULICK, LARRY E
Address: 19313 SEA MIST LONE
City-St-Zip: LUTZ, FL 33558

Title: MGR () Delete
Name: INNISS, B. FITZROY E
Address: 19325 SEA MIST LONE
City-St-Zip: LUTZ, FL 33558

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GULICK, LARRY E
Address: 19313 SEA MIST LANE
City-St-Zip: LUTZ, FL 33558

Title: MGR (X) Change () Addition
Name: INNISS, B. FITZROY
Address: 19325 SEA MIST LANE
City-St-Zip: LUTZ, FL 33558

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: LARRY E. GULICK

MR.

09/30/2006

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