2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Feb 12, 2009
Secretary of State

DOCUMENT# L05000034458

Entity Name: RIVER PINE ESTATES, LLC

Current Principal Place of Business:

3383 FOXCROFT CIRCLE
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

3383 FOXCROFT CIRCLE
OVIEDO, FL 32765

New Mailing Address:

FEI Number: 75-3191829 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CORPORATION COMPANY OF ORLANDO
300 SOUTH ORANGE AVE., SUITE 1000 (SJZ)
ORLANDO, FL 328015403 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: ROBERT J. HOFER

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: P ( ) Delete
Name: HOFER, ROBERT J
Address: 3388 FOXCROFT CIRCLE
City-St-Zip: OVIEDO, FL 32765

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: VP ( ) Change (X) Addition
Name: HOFER, KENNETH M
Address: 3383 FOXCROFT CIRCLE
City-St-Zip: OVIEDO, FL 32765

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: KENNETH HOFER VP 02/12/2009

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