

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000041000

FILED
Mar 26, 2007
Secretary of State

Entity Name: PRAVIN REAL ESTATE INVESTMENTS,LLC

Current Principal Place of Business:

166 DAIRY ROAD
AUBURNDALE, FL 33823

New Principal Place of Business:

1450 SOUTH LAKE SHIPP DRIVE
WINTER HAVEN, FL 33880

Current Mailing Address:

166 DAIRY ROAD
AUBURNDALE, FL 33823

New Mailing Address:

788 SPRUCE ST
LEAVENWORTH, KS 66048

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

Name and Address of Current Registered Agent:

PATEL, PRAVIN
166 DAIRY ROAD
AUBURNDALE, FL 33823 US

Name and Address of New Registered Agent:

PATEL, PRAVIN
811 SUNSET COVE DRIVE
WINTER HAVEN, FL 33880 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: P.M.PATEL

03/26/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PATEL, PRAVIN
Address: 166 DAIRY ROAD
City-St-Zip: AUBURNDALE, FL 33823

Title: MGR () Delete
Name: PATEL, RAJENDRA
Address: 166 DAIRY ROAD
City-St-Zip: AUBURNDALE, FL 33823

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PATEL, PRAVIN
Address: 811 SUNSET COVE DRIVE
City-St-Zip: WINTER HAVEN, FL 33880

Title: MGR (X) Change () Addition
Name: PATEL, RAJENDRA
Address: 811 SUNSET COVE DR
City-St-Zip: WINTER HAVEN, FL 33880

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: R.V.PATEL

MNGR

03/26/2007

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