2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000042911

City-St-Zip: SACO, ME 04072

Entity Name: WOODPLAY OF THE TREASURE COAST, LLC

FILED Apr 29, 2008 Secretary of State

Current P	rincipal Place of Business:	New Principal Place of Business:	
7846 SW E STUART,	ELLIPSE WAY FL 34997	5600 SE LAMAY DRIVE STUART, FL 34997	
Current M	lailing Address:	New Mailing Address:	
7846 SW E STUART,	ELLIPSE WAY FL 34997	5600 SE LAMAY DRIVE STUART, FL 34997	
In accordan		ity company did not receive the prior notice.	
name and	I Address of Current Registered Age	nt: Name and Address of New Registered Agent:	
	N, GEORGE G JR NEZ AVENUE FL 34992 US		
	named entity submits this statement fo e of Florida.	r the purpose of changing its registered office or registered agent, or bo	th
SIGNATUR	RE: GEORGE G. JOHNSON, JR.		
	Electronic Signature of Register	ed Agent Date	_
MANAGING	MEMBERS/MANAGERS:	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM () Delete JOHNSON, GEORGE G JR 5706 SE INEZ AVENUE STUART, FL 34992	Title: () Change () Addition Name: Address: City-St-Zip:	
Title: Name: Address: City-St-Zip:	MGRM () Delete PARENT, ROB 5600 SE LAMAY DRIVE STUART, FL 34997	Title: MGRM (X) Change () Addition Name: PARENT, ROBERT T Address: 5600 SE LAMAY DRIVE City-St-Zip: STUART, FL 34997	
Title: Name: Address:	MGRM () Delete FOURNIER, JEFFREY 9 MABLE AVENUE	Title: () Change () Addition Name: Address:	

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.

City-St-Zip:

SIGNATURE: ROBERT T. PARENT MGRM 04/29/2008