2010 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000048605

Entity Name: N & N REAL ESTATE LLC

FILED Dec 14, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

800 LAUREL OAK DR. SUITE 600

NAPLES, FL 34108

Current Mailing Address: New Mailing Address:

800 LAUREL OAK DR. SUITE 600 NAPLES, FL 34108

FEI Number: 20-2873704 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HL STATUTORY AGENT, INC. 800 LAUREL OAK DRIVE #600 M&I BUILDING NAPLES, FL 34108 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.

in the State of Florida.

SIGNATURE: JEFFREY M. FOLKMAN

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM

Name: URSE, MICHAEL F Address: 8137 BISHOP'S CT.

City-St-Zip: BROADVIEW HEIGHTS, OH 44147

Title: MGRM

Name: MUSARRA, NANCY L Address: 8137 BISHOP'S CT.

City-St-Zip: BROADVIEW HEIGHTS, OH 44147

Title: MGRM

Name: PLATKO, WILLIAM G Address: 6566 SUMMER WIND DR. City-St-Zip: BRECKSVILLE, OH 44141

Title: MGRM

Name: PLATKO, NICOLENE A
Address: 6566 SUMMER WIND DR.
City-St-Zip: BRECKSVILLE, OH 44141

Title: MGRM

Name: STOVSKY, RICHARD P Address: 17325 BITTERSWEET TR City-St-Zip: CHAGRIN FALLS, OH 44023

Title: MGRM

Name: LAUDEL, DAVID

Address: 7369 ROLLING BROOK TR City-St-Zip: SOLON, OH 44139

I hereby 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 Statues.

SIGNATURE: MICHAEL F. URSE MGRM 12/14/2010

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