

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000048729

Entity Name: AIRE, LLC

FILED
Nov 27, 2007
Secretary of State

Current Principal Place of Business:

700 W. HILSBORO BLVD., BLDG 1
DEERFIELD BEACH, FL 33441

New Principal Place of Business:

4680 CONFERENCE WAY SOUTH
BOCA RATON, FL 33431

Current Mailing Address:

700 W. HILSBORO BLVD., BLDG 1
DEERFIELD BEACH, FL 33441

New Mailing Address:

4680 CONFERENCE WAY SOUTH
BOCA RATON, FL 33431

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

HENSCHER, JEFFREY
700 W. HILSBORO BLVD., BLDG 1
DEERFIELD BEACH, FL 33441 US

Name and Address of New Registered Agent:

HENSCHER, JEFFREY M
4680 CONFERENCE WAY SOUTH
BOCA RATON, FL 33431 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: JEFFREY M. HENSCHER

11/27/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MM () Delete
Name: HENSCHER, JEFFREY M MM
Address: 700 HILSBORO BLVD.
City-St-Zip: DEERFIELD BEACH, FL 33441 US

ADDITIONS/CHANGES:

Title: MM (X) Change () Addition
Name: HENSCHER, JEFFREY M MM
Address: 4680 CONFERENCE WAY SOUTH
City-St-Zip: BOCA RATON, FL 33431 US

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: JEFFREY M. HENSCHER

MM

11/27/2007

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