2007 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Feb 27, 2007
Secretary of State

DOCUMENT# L05000051272

Entity Name: THE LAW FIRM OF JOSEPH RODOWICZ, LLC

Current Principal Place of Business:

13275 CROSSPOINTE DRIVE
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

13730 WHISPERING LAKES LANE
PALM BEACH GARDENS, FL 33418

Current Mailing Address:

13275 CROSSPOINTE DRIVE
PALM BEACH GARDENS, FL 33418

New Mailing Address:

13730 WHISPERING LAKES LANE
PALM BEACH GARDENS, FL 33418

FEI Number: 41-2176704 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RODOWICZ, JOSEPH S JR.
13275 CROSSPOINTE DRIVE
PALM BEACH GARDENS, FL 33418 US

Name and Address of New Registered Agent:

RODOWICZ, JOSEPH S JR.
13730 WHISPERING LAKES LANE
PALM BEACH GARDENS, FL 33418 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: JOSEPH RODOWICZ JR. 02/27/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: RODOWICZ, JOSEPH S JR.
Address: 13275 CROSSPOINTE DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33418

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: RODOWICZ, JOSEPH S JR.
Address: 13730 WHISPERING LAKES LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418

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: JOSEPH RODOWICZ JR. MGRM 02/27/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date