

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000052764

Entity Name: AULT PROPERTIES, L.L.C.

FILED  
Oct 30, 2008  
Secretary of State

## Current Principal Place of Business:

562 SOUTH ECON CIRCLE  
SUITE 1040  
OVIEDO, FL 32765 US

## New Principal Place of Business:

## Current Mailing Address:

562 SOUTH ECON CIRCLE  
SUITE 1040  
OVIEDO, FL 32765 US

## New Mailing Address:

FEI Number: 20-2923442      FEI Number Applied For ( )      FEI Number Not Applicable ( )      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:

LEFKOWITZ, IVAN M ESQ.  
430 NORTH MILLS AVENUE  
ORLANDO, FL 32803 US

## Name and Address of New Registered Agent:

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: IAN LEFKOWITZ

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: AULT, WILLIAM  
Address: 562 SOUTH ECON CIRCLE, SUITE 1040  
City-St-Zip: OVIEDO, FL 32765 US

Title: MGR ( ) Delete  
Name: AULT, JAY  
Address: 562 SOUTH ECON CIRCLE, SUITE 1040  
City-St-Zip: OVIEDO, FL 32765 US

Title: MGR ( ) Delete  
Name: AULT, JOSEPH  
Address: 562 SOUTH ECON CIRCLE, SUITE 1040  
City-St-Zip: OVIEDO, FL 32765 US

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JAY AULT

MGR

10/30/2008

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