2006 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Sep 20, 2006
Secretary of State

DOCUMENT# L05000058228

Entity Name: CO3, LLC

Current Principal Place of Business:

PO BOX 180958
TALLAHASSEE, FL 32318

New Principal Place of Business:

Current Mailing Address:

PO BOX 180958
TALLAHASSEE, FL 32318

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THOMPSON, SUSAN S
3520 THOMASVILLE ROAD, 4TH FLOOR
TALLAHASSEE, FL 32309 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: SUSAN S. THOMPSON

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: HOLLIFIELD, RIC
Address: PO BOX 180958
City-St-Zip: TALLAHASSEE, FL 32318

Title: MGRM ( ) Delete
Name: HUTCHESON, DAVID W
Address: 321 SPRUCE CREEK DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

Title: MGRM ( ) Delete
Name: GEORGE, ROBERT D
Address: 2004 SETTING SUN TRAIL
City-St-Zip: TALLAHASSEE, FL 32303

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 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: RIC HOLLIFILED MGRM 09/20/2006

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