2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000058664

Entity Name: TDMK, LLC

FILED Feb 14, 2007 Secretary of State

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

1701 PONCE DE LEON BLVD. 550 BILTMORE WAY, SUITE 700 CORAL GABLES, FL 33134 CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

1701 PONCE DE LEON BLVD. 550 BILTMORE WAY, SUITE 700 CORAL GABLES, FL 33134 CORAL GABLES, FL 33134

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

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

CORPDIRECT AGENTS, INC. POLLER, NEALE J 515 E. PARK AVENUE 550 BILTMORE WAY, SUITE 700

TALLAHASSEE, FL 32301 US CORAL GABLES, FL 33134

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: NEALE J. POLLER 02/14/2007

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: () Delete (X) Change () Addition

ST CLAIR, KEITH R Name: ST CLAIR, KEITH R Name:

MGRM

1701 PONCE DE LEON BLVD. Address: 901 BRICKELL KEY BOULEVARD, UNIT 3708 Address:

City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: MIAMI, FL 33131 US

Title: Title: () Change (X) Addition () Delete Name: Name: MASCARENHAS, TERENCE Address: Address: 50 CRABAPPLE ROAD City-St-Zip: City-St-Zip: MANHASET, NY 11030 US

() Delete Title: MGRM

Title: () Change (X) Addition LAWRENCE, DOUGLAS Name: Name:

901 BRICKELL KEY BOULEVARD, UNIT 3708 Address: Address:

City-St-Zip: City-St-Zip: MIAMI, FL 33131 US

Title: () Delete Title: MGRM () Change (X) Addition

Name: Name: WRIGHT, MALCOLM Address: Address: 2460 SAND LAKE ROAD City-St-Zip: City-St-Zip: ORLANDO, FL 32809 US

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: KEITH R. ST.CLAIR **MGRM** 02/14/2007