

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000066859

FILED
Jan 29, 2008
Secretary of State

Entity Name: COHOME, LLC

Current Principal Place of Business:

2384 NW 49TH LANE
BOCA RATON, FL 22321

New Principal Place of Business:

Current Mailing Address:

2384 NW 49TH LANE
BOCA RATON, FL 22321

New Mailing Address:

2384 NW 49TH LANE
BOCA RATON, FL 33431

FEI Number: 20-5121104 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:

POLLACK, LEWIS
2384 NW 49TH LANE
BOCA RATON, FL 22321 US

Name and Address of New Registered Agent:

POLLACK, LEWIS
2384 NW 49TH LANE
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: LEWIS POLLACK

01/29/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WBS HOLDINGS, LLC,
Address: 425 WEST CAPITOL AVE., SUITE 3801
City-St-Zip: LITTLE ROCK, AR 72201 US

Title: MGR () Delete
Name: LINDA-LEW, LLC,
Address: 2384 NW 49TH LANE
City-St-Zip: BOCA RATON, FL 22321 US

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: LINDA-LEW, LLC,
Address: 2384 NW 49TH LANE
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: W. BRADFORD SHERMAN

MM

01/29/2008

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