

# **2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000069495

Entity Name: L-HOP, LLC

**FILED**  
**Jan 28, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

358 ROSWELL STREET SE  
SUITE 1100  
MARIETTA, GA 30060

**New Principal Place of Business:**

2 E. BRYAN STREET  
SUITE 602  
SAVANNAH, GA 31401

**Current Mailing Address:**

358 ROSWELL STREET SE  
SUITE 1100  
MARIETTA, GA 30060

**New Mailing Address:**

2 E. BRYAN STREET  
SUITE 602  
SAVANNAH, GA 31401

FEI Number: FEI Number Applied For (X) 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:**

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

C.T. CORPORATIONS SYSTEMS  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: CHRISTOPHER DALY

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: POLLACK, DAVID M  
Address: 358 ROSWELL STREET, SE, SUITE 1100  
City-St-Zip: MARIETTA, GA 30060 US

Title: MGRM (X) Change ( ) Addition  
Name: POLLACK, DAVID M  
Address: 2 E. BRYAN ST. SUITE 602  
City-St-Zip: SAVANNAH, GA 31401 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: DAVID M. POLLACK

MGRM

01/28/2007

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