

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

**FILED
May 29, 2007
Secretary of State**

DOCUMENT# L05000073630

Entity Name: REGAL POINTE, LLC

Current Principal Place of Business:

1807 NATURE COVE LANE
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

1807 NATURE COVE LANE
CLERMONT, FL 34711

New Mailing Address:

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:

NGUYEN, ADAM TRI
1807 NATURE COVE LANE
CLERMONT, FL 34711 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: ADAM TRI NGUYEN

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: NGUYEN, ADAM TRI
Address: 1807 NATURE COVE LANE
City-St-Zip: CLERMONT, FL 34711

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

Title: MGRM () Delete
Name: NGUYEN, BINH
Address: 1807 NATURE COVE LANE
City-St-Zip: CLERMONT, FL 34711

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: BINH NGUYEN

MGRM

05/29/2007

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