2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000083440

Entity Name: RENAISSANCE CHILD CARE, LLC

FILED Oct 10, 2006 Secretary of State

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

12730 NEW BRITTANY BLVD 10220 WEST TERRY STREET SUITE 422 BONITA SPRINGS, FL 34135

FORT MYERS, FL 33907

Current Mailing Address: New Mailing Address:

12730 NEW BRITTANY BLVD
SUITE 422
FORT MYERS, FL 33907

10220 WEST TERRY ST.
BONITA SPRINGS, FL 34135

FEI Number: 20-3696656 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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:

COHEN, CELESTE
12730 NEW BRITTANY BLVD
10220 WEST TERRY ST.
SUITE 422
FORT MYERS, FL 33907 US

COHEN, CELESTE
10220 WEST TERRY ST.
BONITA SPRINGS, FL 34135 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: CELESTE P. COHEN 10/10/2006

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES:

MANAGING MEMBERS/MANAGERS:

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

 Name:
 COHEN, CELESTE
 Name:
 COHEN, CELESTE

 Address:
 12730 NEW BRITTANY BLVD., SUITE 422
 Address:
 10220 WEST TERRY ST

 City-St-Zip:
 FORT MYERS, FL 33907
 City-St-Zip:
 BONITA SPRINGS, FL 34135

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

Name:RENAISSANCE, LLC,Name:RENAISSANCE, LLC,Address:12730 NEW BRITTANY BLVD., SUITE 422Address:10220 WEST TERRY STREET.

Address: 12730 NEW BRITTANY BLVD., SUITE 422 Address: 10220 WEST TERRY STREET City-St-Zip: FORT MYERS, FL 33907 City-St-Zip: BONITA SPRINGS, FL 34135

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: CELESTE P. COHEN MGRM 10/10/2006