

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000083853

Entity Name: UNIVERSITY AVE. LLC

FILED
May 15, 2007
Secretary of State

Current Principal Place of Business:

PO BOX 358311
GAINESVILLE, FL 32635

New Principal Place of Business:

15615 NW 138TH DRIVE
ALACHUA, FL 32615

Current Mailing Address:

PO BOX 358311
GAINESVILLE, FL 32635

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EUNICE, KENNETH M
3945 NW 41ST COURT
GAINESVILLE, FL 32606 US

Name and Address of New Registered Agent:

EUNICE, KENNETH M
15615 NW 138TH DRIVE
ALACHUA, FL 32615 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: KENNETH M. EUNICE

05/15/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MCCOLLUM, BONNIE D
Address: 3703 NW 49TH LANE
City-St-Zip: GAINESVILLE, FL 32605

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MCCOLLUM, BONNIE D
Address: 3703 NW 49TH LANE
City-St-Zip: GAINESVILLE, FL 32605

Title: MGRM () Change (X) Addition
Name: EUNICE, KENNETH M
Address: 15615 NW 138TH DRIVE
City-St-Zip: ALACHUA, FL 32615

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: KENNETH M. EUNICE

MGRM

05/15/2007

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