

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000084440

FILED
Nov 14, 2006
Secretary of State

Entity Name: MACRO STONES PROPERTIES, LLC

Current Principal Place of Business:

3205 HANSON ST.
FT. MYERS, FL 33916

New Principal Place of Business:

Current Mailing Address:

3205 HANSON ST.
FT. MYERS, FL 33916

New Mailing Address:

FEI Number: 20-3375269 **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:

TAX HOUSE CORPORATION
1261 E. SAMPLE RD.
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

S. ILANIO BUSINESS SERVICE
1325 S.E. 47TH STREET
WOODRUFT BUILDING, UNIT H
CAPE CORAL, FL 33904 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: SERVANDO ILANIO

11/14/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: FEIERTAG, DAVID MORAES
Address: 3205 HANSON ST.
City-St-Zip: FT. MYERS, FL 33916

Title: MGRM () Delete
Name: FEIERTAG, DANIEL MORAES M
Address: 3205 HANSON ST.
City-St-Zip: FT. MYERS, FL 33916

ADDITIONS/CHANGES:

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

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

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 FIERTAG

MGR

11/14/2006

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