2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000090455

Entity Name: LYON & LYON, LLC

FILED May 27, 2009 Secretary of State

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

5138 MAJESTIC WOODS PLACE 8284 HARBORSIDE CIRCLE SANFORD, FL 32771 ENGLEWOOD, FL 34224

Current Mailing Address: New Mailing Address:

5138 MAJESTIC WOODS PLACE 82 W. RACING CLOUD CT. SANFORD, FL 32771 THE WOODLANDS, TX 77381

FEI Number: 36-4579536 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: Name and Address of New Registered Agent:

LYON, KENNETH W

5138 MAJESTIC WOODS PLACE 82 W. RACING CLOUD CT.

SANFORD, FL 32771 US THE WOODLANDS, TEXAS, FL 77381 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 W. LYON 05/27/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

 Name:
 LYON, GREGORY P
 Name:

 Address:
 8284 HARBORSIDE CIRCLE
 Address:

 City-St-Zip:
 ENGLEWOOD, FL 34224
 City-St-Zip:

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

 Name:
 LYON, MARIE
 Name:

 Address:
 8284 HARBORSIDE CIRCLE
 Address:

 City-St-Zip:
 ENGLEWOOD, FL 34224
 City-St-Zip:

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

 Name:
 LYON, KENNETH W
 Name:
 LYON, KENNETH W

 Address:
 5138 MAJESTIC WOODS PLACE
 Address:
 82 W. RACING CLOUD CT.

 City-St-Zip:
 SANFORD, FL 32771
 City-St-Zip:
 THE WOODLANDS, TX 77381

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

Name: LYON, CAROLYN J
Address: 5138 MAJESTIC WOODS PLACE Address: 82 W. RACING CLOUD CT.
City-St-Zip: SANFORD, FL 32771 City-St-Zip: THE WOODLANDS, TX 77381

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: CAROLYN J. LYON MGRM 05/27/2009