2008 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 06, 2008
Secretary of State

DOCUMENT# L05000092979

Entity Name: KNOXCO PROPERTIES, LLC

Current Principal Place of Business:

208 NORTH PARROTT AVENUE
OKEECHOBEE, FL 34972 US

New Principal Place of Business:

5092 LEEWARD WAY
ORLANDO, FL 32809 US

Current Mailing Address:

208 NORTH PARROTT AVENUE
OKEECHOBEE, FL 34972 US

New Mailing Address:

5092 LEEWARD WAY
ORLANDO, FL 32809 US

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOINER, MOSE
208 NORTH PARROTT AVENUE
OKEECHOBEE, FL 34972 US

Name and Address of New Registered Agent:

JOINER, MOSE B
5092 LEEWARD WAY
ORLANDO, FL 32809 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: MOSE B JOINER 10/06/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: JOINER, MOSE
Address: 208 NORTH PARROTT AVENUE
City-St-Zip: OKEECHOBEE, FL 34972 US

Title: MGRM ( ) Delete
Name: DYER, DOUGLAS A
Address: 208 N PARROTT AVENUE
City-St-Zip: OKEECHOBEE, FL 34972

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: JOINER, MOSE B
Address: 5092 LEEWARD WAY
City-St-Zip: ORLANDO, FL 32809 US

Title: MGRM (X) Change ( ) Addition
Name: DYER, DOUGLAS A
Address: 7525 NE 5TH ST
City-St-Zip: OKEECHOBEE, FL 34972

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: DOUGLAS A DYER MGRM 10/06/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date