

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000096890

Entity Name: 104 NORTHWOOD LLC

FILED
Apr 24, 2007
Secretary of State

Current Principal Place of Business:

472 OAK HAVEN DRIVE
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

801 EDGE FOREST TERRACE
SANFORD, FL 32771

Current Mailing Address:

472 OAK HAVEN DRIVE
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

801 EDGE FOREST TERRACE
SANFORD, FL 32771

FEI Number: FEI Number Applied For (X) 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:

OGIER, STEVE
472 OAK HAVEN DRIVE
ALTAMONTE SPRINGS, FL 32701 US

Name and Address of New Registered Agent:

OGIER, STEVE
801 EDGE FOREST TERRACE
SANFORD, FL 32771 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: STEVE OGIER

04/24/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: OGIER, STEVE
Address: 472 OAK HAVEN DRIVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: MGR () Delete
Name: FERRELL, FRANK J
Address: 735 LITTLE WEIKIVA CIRCLE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGRM () Delete
Name: PATEL, ALPESH R
Address: 1064 MANCHESTER CIRCLE
City-St-Zip: WINTER PARK, FL 32792

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: OGIER, STEVE
Address: 801 EDGE FOREST TERRACE
City-St-Zip: SANFORD, FL 32771

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 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: ALPESH PATEL

MGRM

04/24/2007

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