

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L05000121822

1. Entity Name
HERON PROPERTY INVESTMENTS, LLC



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 NOV -7 PM 4:40

Principal Place of Business
10400 N.W. 5TH COURT
PLANTATION, FL 33324

Mailing Address
10400 N.W. 5TH COURT
PLANTATION, FL 33324



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

10162006 REIN-LLC CR2E101 (11/05)

4. FEI Number

02-0788322

Applied For

Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FILINGS, INC.
3732 N.W. 16TH STREET
FT. LAUDERDALE, FL 33311-4132

Name Prince A. Donahoe IV, Esq
Street Address (P.O. Box Number is Not Acceptable)
1333 S. University Dr. # 210
City Plantation FL Zip Code 33324

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Prince A. Donahoe

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

10-31-06

DATE

FILE NOW!! FEE IS \$150.00
After January 1, 2007, Fee will be \$200.00

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME MGRM
STREET ADDRESS HERON, FITZROY
CITY-ST-ZIP 10400 N.W. 5TH COURT
PLANTATION, FL 33324 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP 11/07/06--01056--024 **155.00
800081595948
11/07/06--01056--024 **155.00 ☐ Change ☐ Addition

TITLE
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 registered agent or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

11/2/06 954-473-4530
Date Daytime Phone #

REINSTATEMENT 2006