

**2009 LIMITED LIABILITY COMPANY REINSTATEMENT**

**FILED  
Oct 22, 2009  
Secretary of State**

DOCUMENT# L06000002121

Entity Name: HANRE, LLC

**Current Principal Place of Business:**

**New Principal Place of Business:**

2001 S. ADAMS  
TALLAHASSEE, FL 32301 US

**Current Mailing Address:**

**New Mailing Address:**

POST OFFICE BOX 6615  
TALLAHASSEE, FL 32314 US

FEI Number: 20-4084015      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:**

SATI, HASSAN  
2001 S. ADAMS  
TALLAHASSEE, FL 32301 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: HASSAN SATI

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: SATI, HASSAN  
Address: 2001 S. ADAMS  
City-St-Zip: TALLAHASSEE, FL 32301

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: HASSAN SATI

MGRM

10/22/2009

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