

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000003768

**FILED**  
**Feb 10, 2008**  
**Secretary of State**

**Entity Name:** CNM GROUP, LLC

**Current Principal Place of Business:**

7901 KINGSPONTE PARKWAY  
SUITE 300  
ORLANDO, FL 32819

**New Principal Place of Business:**

5537 DELANO LN  
ORLANDO, FL 32821

**Current Mailing Address:**

7901 KINGSPONTE PARKWAY  
SUITE 300  
ORLANDO, FL 32819

**New Mailing Address:**

5537 DELANO LN  
ORLANDO, FL 32821

**FEI Number:** 16-1752442      **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:**

MARTINEZ, CARMEN M  
7901 KINGSPONTE PARKWAY  
SUITE 30  
ORLANDO, FL 32819 US

**Name and Address of New Registered Agent:**

MARTINEZ, CARMEN M  
5537 DELANO LN  
ORLANDO, FL 32821 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: CARMEN MARTINEZ

02/10/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: RAMOS, CARLO  
Address: 7901 KINGSPONTE PARKWAY  
City-St-Zip: ORLANDO, FL 32819

Title: MGR (X) Delete  
Name: MARTINEZ, CARMEN  
Address: 7901 KINGSPONTE PARKWAY  
City-St-Zip: ORLANDO, FL 32819

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: MARTINEZ, CARMEN  
Address: 5537 DELANO LN  
City-St-Zip: ORLANDO, FL 32821

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: CARMEN MARTINEZ

MGR

02/10/2008

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