2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000029692

Entity Name: UNITY WOODS AT AMELIA ISLAND, LLC

FILED Dec 05, 2007 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

145 NW CENTRAL PARK PLAZA 145 NW CENTRAL PARK PLAZA PORT ST. LUCIE, FL 34986

200

PORT ST. LUCIE, FL 34986

Current Mailing Address: New Mailing Address:

145 NW CENTRAL PARK PLAZA 145 NW CENTRAL PARK PLAZA PORT ST. LUCIE, FL 34986 200

PORT ST. LUCIE, FL 34986

FEI Number: 20-8389029 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:

SIMMONS, EVETT L SIMMONS, EVETT L 145 NW CENTRAL PARK PLAZA 145 NW CENTRAL PARK PLAZA PORT ST. LUCIE, FL 34986 200 PORT ST. LUCIE, FL 34986 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: EVETT L. SIMMONS 12/05/2007

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

() Delete Title: () Change (X) Addition

SIMMONS, EVETT L Name: Name:

Address: Address: 145 NW CENTRAL PARK PLAZA, SUITE 200

City-St-Zip: City-St-Zip: PORT ST. LUCIE, FL 34986 US

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: EVETT L. SIMMONS 12/05/2007