

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000037632

FILED
Apr 30, 2008
Secretary of State

Entity Name: ROCK THE HOWSE PRODUCTIONS, LLC

Current Principal Place of Business:

1100 N. MAIN STREET, STE. B
KISSIMMEE, FL 34744

New Principal Place of Business:

10524 MOSS PARK RD
SUITE #204-401
ORLANDO, FL 32832

Current Mailing Address:

PO BOX 701323
ST. CLOUD, FL 34744

New Mailing Address:

10524 MOSS PARK RD
SUITE #204-401
ORLANDO, FL 32832

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

HOWSE, RON
1100 N. MAIN STREET, STE. B
KISSIMMEE, FL 34744 US

Name and Address of New Registered Agent:

HOWSE, RON
10524 MOSS PARK RD
SUITE #204-401
ORLANDO, FL 32832 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: RON HOWSE

04/30/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HOWSE, RON
Address: P.O. BOX 701323
City-St-Zip: ST CLOUD, FL 34744

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: HOWSE, RON
Address: 10524 MOSS PARK RD, STE #204-401
City-St-Zip: ORLANDO, FL 32832

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: RON HOWSE

MGR

04/30/2008

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