2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000039407

Entity Name: DE LEON ENTERPRISES, LLC

FILED Mar 10, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5645 NATURE LANE 7740 SOUTHSIDE BLVD. #208 TALLAHASSEE, FL 32303 JACKSONVILLE, FL 32256

Current Mailing Address: New Mailing Address:

5645 NATURE LANE 7740 SOUTHSIDE BLVD. #208 TALLAHASSEE, FL 32303 JACKSONVILLE, FL 32256

FEI Number: 14-1959346 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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:

MCCUINN, MICHAEL

12334 SE 148TH TERRACE

MIAMI, FL 33186 US

DELEON, ALAIN
7740 SOUTHSIDE BLVD. #208
JACKSONVILLE, FL 32256 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: ALAIN DELEON 03/10/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

Name: DE LEON, ALAIN Name: DE LEON, ALAIN

Address: 5645 NATURE LANE Address: 7740 SQUITHSIDE BLVD #208

 Address:
 5645 NATURE LANE
 Address:
 7740 SOUTHSIDE BLVD. #208

 City-St-Zip:
 TALLAHASSEE, FL 32303
 City-St-Zip:
 JACKSONVILLE, FL 32256

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: ALAIN DELEON MGRM 03/10/2008