2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000041502

Entity Name: CARYSFORT HARBOR, LLC

FILED Dec 11, 2007 Secretary of State

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

205 N.E. 5TH TERRACE 17 SUNSET CAY ROAD DELRAY BEACH, FL 33444 KEY LARGO, FL 33037 US

Current Mailing Address: New Mailing Address:

205 N.E. 5TH TERRACE 17 SUNSET CAY ROAD DELRAY BEACH, FL 33444 KEY LARGO, FL 33037 US

FEI Number: 20-4845172 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

1031 EXCHANGE CORPORATION ATTN: SUSAN N. MILLS 205 N.E. 5TH TERRACE DELRAY BEACH, FL 33444 US LYNN, SANDRA T 830 NORTH KROME AVENUE HOMESTEAD, FL 33030 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: SANDRA T. LYNN 12/11/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete

Name: 1031 EXCHANGE CORPOR, ATION

Address: 205 N.E. 5TH TERRACE
City-St-Zip: DELRAY BEACH, FL 33444

Title: () Delete

Name: Address: City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition

Name: BERMAN, MICHAEL A
Address: 17 SUNSET CAY ROAD
City-St-Zip: KEY LARGO, FL 33037 US

Title: MGRM () Change (X) Addition

 Name:
 SWIFT, SUSAN S

 Address:
 17 SUNSET CAY ROAD

 City-St-Zip:
 KEY LARGO, FL 33037 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: MICHAEL A. BERMAN MGRM 12/11/2007