2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000045698

Entity Name: 3200 GIFFORD LANE LLC

FILED Jan 28, 2008 Secretary of State

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

PO BOX 11536 APO 37/C, TOWER 9, BEL-AIR ON THE PEAK GRAND CAYMAN, CAYMAN ISLANDS,

68 BEL-AIR PEAK AVENUE

POKFULAM, HONG KONG, NA HONG KONG XX

Current Mailing Address: New Mailing Address:

PO BOX 11536 APO 37/C, TOWER 9, BEL-AIR ON THE PEAK

68 BEL-AIR PEAK AVENUE GRAND CAYMAN, CAYMAN ISLANDS,

POKFULAM, HONG KONG, NA HONG KONG XX

FFI 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: Name and Address of New Registered Agent:

JONES, DAVID OWEN 855 NW 165TH AVENUE

PEMBROKE PINES, FL 33028 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: DAVID O JONES

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

JONES, DAVID OWEN JONES, DAVID OWEN Name: Name: Address: PO BOX 11536 APO Address: 37/C, T9, BEL-AIR ON THE PEAK, 68 PEAK AVE

City-St-Zip: GRAND CAYMAN, CAYMAN ISLANDS, City-St-Zip: POKFULAM, HONG KONG, NA HONG KONG XX

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: DAVID O JONES 01/28/2008