

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000061028

Entity Name: KUMUKOA, LLC

FILED
Oct 03, 2007
Secretary of State

Current Principal Place of Business:

2701 MAITLAND CENTER PARKWAY, SUITE 125
MAITLAND, FL 32751

New Principal Place of Business:

150 N. ORANGE AVENUE
SUITE 304
ORLANDO, FL 32801

Current Mailing Address:

2701 MAITLAND CENTER PARKWAY, SUITE 125
MAITLAND, FL 32751

New Mailing Address:

150 N. ORANGE AVENUE
SUITE 304
ORLANDO, FL 32801

FEI Number: 20-5021168 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:

FLOWERS, DALE A
2701 MAITLAND CENTER PARKWAY, SUITE 125
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

MURPHY, EDWARD H
150 N. ORANGE AVENUE, SUITE 304
ORLANDO, FL 32801 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: EDWARD H. MURPHY

10/03/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MURPHY, EDWARD H
Address: 2701 MAITLAND CENTER PARKWAY, SUITE 125
City-St-Zip: MAITLAND, FL 32751

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MURPHY, EDWARD H
Address: 150 N. ORANGE AVENUE, SUITE 304
City-St-Zip: ORLANDO, FL 32801

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: EDWARD H. MURPHY

MGR

10/03/2007

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