

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000062251

Entity Name: NAPLES RENTERS, LLC

FILED
Nov 09, 2007
Secretary of State

Current Principal Place of Business:

999 VANDERBILT BEACH ROAD
SUITE 610
NAPLES, FL 34108

Current Mailing Address:

P.O. BOX 771450
NAPLES, FL 34107

New Principal Place of Business:

6001 BROKEN SOUND PARKWAY NW
SUITE 600
BOCA RATON, FL 33487

New Mailing Address:

190 SE 19TH AVENUE
POMPANO BEACH, FL 33060

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:

DUBNER, DEREK A ESQ.
999 VANDERBILT BEACH ROAD
SUITE 610
NAPLES, FL 34108 US

Name and Address of New Registered Agent:

DUBNER, DEREK A ESQ.
6001 BROKEN SOUND PARKWAY NW
SUITE 600
BOCA RATON, FL 33487 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: DEREK A. DUBNER ESQ.

11/09/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TECHNOLOGY INVESTORS, II, INC.
Address: 999 VANDERBILT BEACH ROAD, STE 610
City-St-Zip: NAPLES, FL 34108

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: TECHNOLOGY INVESTORS, II, INC.
Address: 6001 BROKEN SOUND PARKWAY NW, SUITE 600
City-St-Zip: BOCA RATON, FL 33487

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: DEREK A. DUBNER ESQ.

SEC

11/09/2007

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