

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000063767

Entity Name: 780 RANCH ROAD, LLC

FILED
Dec 08, 2007
Secretary of State

Current Principal Place of Business:

150 SOUTH UNIVERSITY DRIVE, SUITE F
PLANTATION, FL 33324

New Principal Place of Business:

2705 NE 32ND AVENUE
FORT LAUDERDALE, FL 33308

Current Mailing Address:

150 SOUTH UNIVERSITY DRIVE, SUITE F
PLANTATION, FL 33324

New Mailing Address:

2705 NE 32ND AVENUE
FORT LAUDERDALE, FL 33308

FEI Number: 20-4984299 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:

MORSELLO, JASON F
150 SOUTH UNIVERSITY DRIVE, SUITE F
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

MORSELLO, JASON F
2705 NE 32ND AVENUE
FORT LAUDERDALE, FL 33308 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: JASON F MORSELLO

12/08/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MORSELLO, JASON F
Address: 150 SOUTH UNIVERSITY DRIVE, SUITE F
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MORSELLO, JASON F
Address: 2705 NE 32ND AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33308

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: JASON F MORSELLO

MGR

12/08/2007

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