

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000072550

FILED
Jan 20, 2009
Secretary of State

Entity Name: CORPORATE ASSET MANAGEMENT, LLC

Current Principal Place of Business:

4300 S US HWY #1 STE 203-213
JUPITER, FL 33477

New Principal Place of Business:

201 OCEAN DRIVE
KEY LARGO, FL 33037

Current Mailing Address:

4300 S US HWY #1 STE 203-213
JUPITER, FL 33477

New Mailing Address:

201 OCEAN DRIVE
KEY LARGO, FL 33037

FEI Number: 28-3524164

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIDDENS, GARY
4300 S US HWY #1 STE 203-213
JUPITER, FL 33477 US

Name and Address of New Registered Agent:

GIDDENS, GARY
201 OCEAN DRIVE
FLORIDA, FL 33037 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: GARY GIDDENS

01/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GIDDENS, GARY
Address: 4300 S US HWY #1 STE 203-213
City-St-Zip: JUPITER, FL 33477

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GIDDENS, GARY
Address: 201 OCEAN DRIVE
City-St-Zip: KEY LARGO, FL 33037

Title: MGRM () Change (X) Addition
Name: MONROE, GENI
Address: 1022 NV HWY #181
City-St-Zip: BOULDER CITY, NV 89005

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: GARY GIDDENS

MGRM

01/20/2009

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