2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000077287

Entity Name: CREATIVE REAL ESTATE, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
8800 UNIVERSITY PKWY B-6 PENSACOLA, FL 32514	

Current Mailing Address:	**New Mailing Address:**
P.O. BOX 267 GULF BREEZE, FL 32562	8800 UNIVERSITY PKWY B-6 PENSACOLA, FL 32514

FEI Number: 20-5315264   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:	**Name and Address of New Registered Agent:**
THOMPSON, MARY LYNN 207 LORUNA DRIVE GULF BREEZE, FL 32561 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: MARY LYNN THOMPSON
                            Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS:	**ADDITIONS/CHANGES:**
Title: MGR ( ) Delete Name: THOMPSON, MARY LYNN Address: P.O. BOX 267 City-St-Zip: GULF BREEZE, FL 32562	Title: MGR (X) Change ( ) Addition Name: THOMPSON, MARY LYNN Address: 207 LORUNA DRIVE City-St-Zip: GULF BREEZE, FL 32561
Title: MGR ( ) Delete Name: BARBARA, THOMPSON Address: P.O. BOX 267 City-St-Zip: GULF BREEZE, FL 32562	Title: MGR (X) Change ( ) Addition Name: BARBARA, THOMPSON Address: 207 LORUNA DRIVE City-St-Zip: GULF BREEZE, FL 32561

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: MARY LYNN THOMPSON   MGR   11/17/2008
                  Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date