

**2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

**FILED  
Oct 11, 2007  
Secretary of State**

DOCUMENT# L06000106649

Entity Name: 747 RIO, LLC

**Current Principal Place of Business:**

747 NE DIXIE HIGHWAY  
JENSEN BEACH, FL 34957

**New Principal Place of Business:**

**Current Mailing Address:**

747 NE DIXIE HIGHWAY  
JENSEN BEACH, FL 34957

**New Mailing Address:**

FEI Number: 20-5822607      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

REAL ESTATE ACQUISITIONS  
2194 SE ST. LUCIE BLVD.  
STUART, FL 34996 US

**Name and Address of New Registered Agent:**

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: DANIEL MCGRANE

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: GARGANO, ANTHONY  
Address: 747 NE DIXIE HIGHWAY  
City-St-Zip: JENSEN BEACH, FL 34957

Title: MGR ( ) Delete  
Name: MCGRANE, JUDITH  
Address: 2194 SE ST. LUCIE BLVD.  
City-St-Zip: STUART, FL 34996

Title: MGR ( ) Delete  
Name: MCGRANE, DANIEL  
Address: 2194 SE ST. LUCIE BLVD.  
City-St-Zip: STUART, FL 34996

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DANIEL MCGRANE

MM

10/11/2007

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