

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000110597

Entity Name: 228 PARTNERS, LLC

FILED
Nov 14, 2007
Secretary of State

Current Principal Place of Business:

31 N. ROSCOE BOULEVARD
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

341 N. ROSCOE BOULEVARD
PONTE VEDRA BEACH, FL 32082

Current Mailing Address:

31 N. ROSCOE BOULEVARD
PONTE VEDRA BEACH, FL 32082

New Mailing Address:

341 N. ROSCOE BOULEVARD
PONTE VEDRA BEACH, FL 32082

FEI Number: 20-8004607 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:

NORENBERG, CYNTHIA F
341 N. ROSCOE BLVD.
PONTE VEDRA BEACH, FL 32082 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: CYNTHIA NOREMBERG

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

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

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

ADDITIONS/CHANGES:

Title: PTNR () Change (X) Addition
Name: NOREMBERG, CYNTHIA
Address: 341 N. ROSCOE BLVD
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

Title: PTNR () Change (X) Addition
Name: WEEKS, PENNEY
Address: 4432 SEABREEZE DRIVE
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

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: CYNTHIA NOREMBERG

PTNR

11/14/2007

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