## 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L06000113088

Entity Name: CORA 2006, LLC

FILED Oct 01, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10263 WHISPERING FOREST DRIVE #719 525 6TH AVENUE SOUTH

JACKSONVILLE, FL 32257 JACKSONVILLE BEACH, FL 32250

Current Mailing Address: New Mailing Address:

PO BOX 16952 525 6TH AVENUE SOUTH

JACKSONVILLE, FL 32245 JACKSONVILLE BEACH, FL 32250

FEI Number: 20-5935024 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:

KIRALY, GABOR KIRALY, GABOR

10263 WHISPERING FOREST DRIVE #719 525 6TH AVENUE SOUTH JACKSONVILLE, FL 32257 US JACKSONVILLE, FL 32250 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: GABOR KIRALY 10/01/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition

Name: KIRALY, GABOR
Address: 10263 WHISPERING FOREST DRIVE #719
Address: 525 6TH AVENUE SOUTH

City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition

Name: SZELL, ORSOLYA Name: SZELL, ORSOLYA
Address: 10263 WHISPERING FOREST DRIVE #719 Address: 525 6TH AVENUE SOUTH

City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: JACKSONVILLE BEACH, FL 32250

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: GABOR KIRALI MGR 10/01/2008