

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

**FILED
Oct 05, 2007
Secretary of State**

DOCUMENT# L06000113266

Entity Name: COHEN WAY, LLC

Current Principal Place of Business:

1757 N EAST AVE
SARASOTA, FL 34234

New Principal Place of Business:

Current Mailing Address:

1757 N EAST AVE
SARASOTA, FL 34234

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACOBSON, MICHAEL
1757 N EAST AVE
SARASOTA, FL 34234 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: MICHAEL JACOBSON

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

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

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

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

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: JACOBSON, MICHAEL
Address: 7768 AROLLA PINE
City-St-Zip: SARASOTA, FL 34240

Title: MGR () Change (X) Addition
Name: LEACH, BROCK
Address: 5315 HIDDEN HARBOR ROAD
City-St-Zip: SARASOTA, FL 34242

Title: MGR () Change (X) Addition
Name: RIPLEY, ROBERT
Address: 5018 HIGEL AVENUE
City-St-Zip: SARASOTA, FL 34242

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: MICHAEL JACOBSON

MGR

10/05/2007

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