

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000115561

Entity Name: CRICKET CLUB, LLC

FILED
Oct 22, 2007
Secretary of State

Current Principal Place of Business:

10216 SW 49TH LANE
GAINESVILLE, FL 32608 US

New Principal Place of Business:

Current Mailing Address:

10216 SW 49TH LANE
GAINESVILLE, FL 32608 US

New Mailing Address:

FEI Number: FEI Number Applied For (X) 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:

KIMBERLY, BOSSHARDT
5532-A NW 43RD ST
GAINESVILLE, FL 32653 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: KIMBERLY BOSSHARDT

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BOSSHARDT, CAROL R
Address: 5542 NW 43RD ST
City-St-Zip: GAINESVILLE, FL 32653 US

Title: MGRM () Delete
Name: WHITE, JOB E
Address: 10216 SW 49TH LANE
City-St-Zip: GAINESVILLE, FL 32608 US

Title: MGRM () Delete
Name: WILLIAMS, THOMAS J
Address: PO BOX 368
City-St-Zip: ARCHER, FL 32618 US

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: KIMBERLY BOSSHARDT

RA

10/22/2007

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