2007 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 09, 2007
Secretary of State

DOCUMENT# L06000120306

Entity Name: MCCAIN FLORIDA PROPERTY, LLC

Current Principal Place of Business:

15 LEDGEWOOD FARM DRIVE
COHASSET, MA 02025

New Principal Place of Business:

Current Mailing Address:

15 LEDGEWOOD FARM DRIVE
COHASSET, MA 02025

New Mailing Address:

FEI Number: 20-8093948 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WOODWARD, CRAIG R
606 BALD EAGLE DRIVE,STE 500
MARCO ISLAND, FL 34145 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: CRAIG R. WOODWARD

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: SUITS, MARY
Address: 3503 ALPS CT.
City-St-Zip: COLUMBIA, MO 65203

Title: MGR ( ) Delete
Name: MCCAIN, THOMAS
Address: 15 LEDGEWOOD FARM DRIVE
City-St-Zip: COHASSET, MA 02025

Title: MGR ( ) Delete
Name: MCCAIN, ROBERT
Address: 111 WILSHIRE CT.
City-St-Zip: DANVILLE, CA 94526

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: THOMAS MCCAIN MGR 10/09/2007

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