2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000008458

Address:

City-St-Zip:

LAWRENCEVILLE, GA 30046

Entity Name: APALACHEE CENTER, LLC

FILED Jan 05, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 9512 APALACHEE PARKWAY TALLAHASSEE, FL 32303 **Current Mailing Address: New Mailing Address:** 9512 APALACHEE PARKWAY P.O. BOX 1565 TALLAHASSEE, FL 32303 LAWRENCEVILLE, GA 30046 FEI Number: 20-4133765 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: BAISCH, PAUL 1038 WEST 11TH COURT PANAMA CITY, FL 32401 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: PAUL BAISCH Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition HEWATT, MARVIN Name: Name: Address: P. O. BOX 1565 Address: City-St-Zip: LAWRENCEVILLE, GA 30046 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: RUSSELL, BARON J Name: Address: P. O. BOX 1565 Address: City-St-Zip: LAWRENCEVILLE, FL 30046 City-St-Zip: Title: MGR () Delete Title: () Change () Addition MOON, SCOTT Name: Name: P. O. BOX 1565

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.

Address:

City-St-Zip:

SIGNATURE: SCOTT A. MOON 01/05/2009