

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000011549

FILED
Jun 17, 2009
Secretary of State

Entity Name: JASMINE HOLDINGS GROUP, LLC

Current Principal Place of Business:

7025 COUNTY ROAD 46A, SUITE 1071
LAKE MARY, FL 32746

New Principal Place of Business:

1485 INTERNATIONAL PARKWAY
SUITE 1001
HEATHROW, FL 32746 US

Current Mailing Address:

7025 COUNTY ROAD 46A, SUITE 1071
LAKE MARY, FL 32746

New Mailing Address:

1485 INTERNATIONAL PARKWAY
SUITE 1001
HEATHROW, FL 32746 US

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

OLIVER, DAVID S ESQ
2300 SUNTRUST CENTER, 200 S. ORANGE AVENUE
ORLANDO, FL 328013432 US

Name and Address of New Registered Agent:

OLIVER, DAVID S ESQ
200 S. ORANGE AVENUE
SUITE 2300
ORLANDO, FL 32801 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: DAVID S. OLIVER, ESQ.

06/17/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

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

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: NWAIGWE, CHINERO
Address: 4905 SAMMY JOE DRIVE
City-St-Zip: FAIRFAX, VA 22030 US

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: CHINERO NWAIGWE

MGRM

06/17/2009

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