

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000012188

Entity Name: FAMILY TREE, LLC

FILED  
Oct 22, 2009  
Secretary of State

**Current Principal Place of Business:**

2845 FOXHALL DRIVE WEST  
W. PALM BEACH, FL 33417 US

**New Principal Place of Business:**

**Current Mailing Address:**

2845 FOXHALL DRIVE WEST  
W. PALM BEACH, FL 33417 US

**New Mailing Address:**

FEI Number: 20-8369661      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:**

WILSON, RICHARD  
2845 FOXHALL DRIVE WEST  
W. PALM BEACH, FL 33417 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: RICHARD WILSON

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WILSON, RICHARD G  
Address: 2845 FOXHALL DRIVE WEST  
City-St-Zip: W. PALM BEACH, FL 33417 US

Title: MGRM ( ) Delete  
Name: DAVIS, DIANE P  
Address: 7278 NW 47 PLACE  
City-St-Zip: LAUDERHILL, FL 33319 US

Title: MGRM ( ) Delete  
Name: STIEBEL-CHIN, GRETA C  
Address: 8170 MAN-O-WAR ROAD  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: MGRM ( ) Delete  
Name: WILSON, MAXINE E  
Address: 6653 TRAVELER ROAD  
City-St-Zip: W PALM BEACH, FL 33411 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:

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: RICHARD WILSON

PRES

10/22/2009

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