

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000027083

FILED
Jul 21, 2009
Secretary of State

Entity Name: FERRO INVESTMENTS, L.L.C.

Current Principal Place of Business:

2018 RIVERS OWN ROAD
ST. AUGUSTINE, FL 32092

New Principal Place of Business:

Current Mailing Address:

2018 RIVERS OWN ROAD
ST. AUGUSTINE, FL 32092

New Mailing Address:

FEI Number: 22-3531729 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

WALKER, JAMES W ESQ.
228 PONTE VEDRA PARK DRIVE, SUITE 200
PONTE VEDRA BEACH, FL 32082 US

Name and Address of New Registered Agent:

FERRO, GUS C OWNER
2018 RIVERS OWN ROAD
ST. AUGUSTINE, FL 32092 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: GUS FERRO

07/21/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FERRO, KIM-SU M
Address: 2018 RIVERS OWN ROAD
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: MGRM (X) Delete
Name: FERRO, GUS C JR.
Address: 2018 RIVERS OWN ROAD
City-St-Zip: ST. AUGUSTINE, FL 32092

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FERRO, GUS C
Address: 2018 RIVERS OWN ROAD
City-St-Zip: ST. AUGUSTINE, FL 32092

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: GUS FERRO

MGRM

07/21/2009

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