

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000084204

FILED
Nov 11, 2008
Secretary of State

Entity Name: BUTTERS CAPITAL IX, LLC

Current Principal Place of Business:

6820 LYONS TECHNOLOGY CIRCLE, SUITE 100
COCONUT CREEK, FL 33073

New Principal Place of Business:

6820 LYONS TECHNOLOGY CIRCLE,
SUITE 100
COCONUT CREEK, FL 33073

Current Mailing Address:

6820 LYONS TECHNOLOGY CIRCLE, SUITE 100
COCONUT CREEK, FL 33073

New Mailing Address:

6820 LYONS TECHNOLOGY CIRCLE,
SUITE 100
COCONUT CREEK, FL 33073

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOUK, JANE A
150 WEST FLAGLER STREET, 2200 MUSEUM TOWER
MIAMI, FL 33130 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: JANE A. HOUK

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

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

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: BUTTERS, MALCOLM
Address: 6820 LYONS TECHNOLOGY CIRCLE, SUITE 100
City-St-Zip: COCONUT CREEK, FL 33073

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: MALCOLM BUTTERS

MGR

11/11/2008

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