2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000085840

Entity Name: REYNOLDS & SIMONS, LLC

FILED May 20, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1125 DON CUTLER SR. DRIVE ALBANY, GA 31705

Current Mailing Address: New Mailing Address:

P.O. BOX 5844 P.O. BOX 70723 TALLAHASSEE, FL 32314 P.O. BOX 70723 ALBANY, GA 31708

FEI Number: 58-2234596 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:

SIMONS, IRA G 501 BLAIRSTONE ROAD 823 TALLAHASSEE, FL 32301 US

TALLAHASSEE, FL 32301 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: IRA G. SIMONS

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES:

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete Title: MGR (X) Change () Addition

Name:CLARENCE, REYNOLDS JName:IRA, SIIMONS GAddress:501 BLAIRSTONE ROAD #823Address:501 BLAIRSTONE ROAD #823

Address: 501 BLAIRSTONE ROAD #823 Address: 501 BLAIRSTONE ROAD #
City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: TALLAHASSEE, FL 32301

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: IRA G. SIMONS MGR 05/20/2009