2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000115308

Entity Name: CHARLES FLOYD LLC

FILED Jul 15, 2009 Secretary of State

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

117 FIRST AVE N 117 FIRST AVE N

JACKSONVILLE, FL 32250 JACKSONVILLE BEACH, FL 32250

Current Mailing Address: New Mailing Address:

117 FIRST AVE N 117 FIRST AVE N

JACKSONVILLE, FL 32250 JACKSONVILLE BEACH, FL 32250

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FLOYD, CHARLES
117 FIRST AVE N

FLOYD, CHARLES
117 FIRST AVE N

JACKSONVILLE, FL 32250 US JACKSONVILLE BEACH, FL 32250 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: CHARLES A. FLOYD 07/15/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

 Name:
 FLOYD, CHARLES
 Name:
 FLOYD, CHARLES A

 Address:
 117 FIRST AVE N
 Address:
 117 FIRST AVE N

City-St-Zip: JACKSONVILLE, FL 32250 City-St-Zip: JACKSONVILLE BEACH, FL 32250

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

 Name:
 Name:
 FLOYD, JUDITH G

 Address:
 Address:
 117 FIRST AVE N

City-St-Zip: City-St-Zip: JACKSONVILLE BEACH, FL 32250

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: CHARLES A. FLOYD MGRM 07/15/2009