2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Nov 24, 2009
Secretary of State

DOCUMENT# L08000023908

Entity Name: CAVO DEVELOPMENT, LLC

Current Principal Place of Business:

1806 NORTH FLAMINGO ROAD
SUITE 312
PEMBROKE PINES, FL 33028 US

New Principal Place of Business:

1 GRAND PALMS DRIVE
PEMBROKE PINES, FL 33027 US

Current Mailing Address:

1806 NORTH FLAMINGO ROAD
SUITE 312
PEMBROKE PINES, FL 33028 US

New Mailing Address:

1 GRAND PALMS DRIVE
PEMBROKE PINES, FL 33027 US

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:

CAVO, VINCENZO S
1806 NORTH FLAMINGO ROAD
SUITE 312
PEMBROKE PINES, FL 33028 US

Name and Address of New Registered Agent:

CAVO, VINCENZO S
1 GRAND PALMS DRIVE
PEMBROKE PINES, FL 33027 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: VINCENZO S. CAVO 11/24/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: CAVO, VINCENZO S
Address: 1806 NORTH FLAMINGO ROAD, SUITE 312
City-St-Zip: PEMBROKE PINES, FL 33028 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: CAVO, VINCENZO S
Address: 1 GRAND PALMS DRIVE
City-St-Zip: PEMBROKE PINES, FL 33027 US

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: VINCENZO S. CAVO MGRM 11/24/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date