

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000028022

**FILED**  
**May 11, 2010**  
**Secretary of State**

**Entity Name:** WOODHAVEN MANAGEMENT FLORIDA, LLC

**Current Principal Place of Business:**

316 SOUTH BAYLEN ST., SUITE 300  
PENSACOLA, FL 32502 US

**New Principal Place of Business:**

**Current Mailing Address:**

665 FALLS LAKE DRIVE  
ALPHARETTA, GA 30022 US

**New Mailing Address:**

**FEI Number:** 26-2198669

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HICKS, LARRY K  
316 SOUTH BAYLEN ST., SUITE 300  
PENSACOLA, FL 32502 US

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: CHRIS GRAHAM

05/11/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: JOEL, KENNETH H  
Address: 665 FALLS LAKE DRIVE  
City-St-Zip: ALPHARETTA, GA 30022 US

Title: MGRM  
Name: JOEL, DAVID  
Address: 1753 PEACHTREE ROAD  
City-St-Zip: ATLANTA, GA 30309 US

I hereby 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: DAVID JOEL

MGRM

05/11/2010

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