2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000076507

Entity Name: 422 JACKSONVILLE DRIVE, LLC

FILED Oct 13, 2009 Secretary of State

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

422 JACKSONVILLE DRIVE JACKSONVILLE BEACH, FL 32250

Current Mailing Address: New Mailing Address:

484 JACKSONVILLE DRIVE
JACKSONVILLE BEACH, FL 32250

422 JACKSONVILLE DRIVE
JACKSONVILLE BEACH, FL 32250

FEI Number: 94-3436691 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:

ROBERTS, LORI A CLIFFORD, KATHRYN B
484 JACKSONVILLE DRIVE 422 JACKSONVILLE DRIVE

JACKSONVILLE BEACH, 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: KATHRYN BALL CLIFFORD 10/13/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: (X) Change () Addition () Delete CLIFFORD, KATHRYN B CLIFFORD, KATHRYN B Name: Name: Address: 484 JACKSONVILLE DRIVE Address: 422 JACKSONVILLE DRIVE City-St-Zip: JACKSONVILLE BEACH, FL 32250 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: KATHRYN BALL CLIFFORD MGRM 10/13/2009