

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000076561

FILED
Oct 27, 2009
Secretary of State

Entity Name: 1160 CYPRESS GLEN CIRCLE, LLC

Current Principal Place of Business:

1160 CYPRESS GLEN CIRCLE
KISSIMMEE, FL 34741

New Principal Place of Business:

Current Mailing Address:

14 EAST WASHINGTON STREET, SUITE 200
ORLANDO, FL 32801

New Mailing Address:

1160 CYPRESS GLEN CIRCLE
KISSIMMEE, FL 34741

FEI Number: 11-3800210 **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:

RINGER, HENRY, BUCKLEY & SEACORD, P.A.
14 EAST WASHINGTON STREET SUITE 200
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

DENARDIS, MICHAEL R
1160 CYPRESS GLEN CIR
KISSIMMEE, FL 34741 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: MICHAEL DENARDIS

10/27/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DENARDIS, MICHAEL R
Address: 1160 CYPRESS GLEN CIRCLE
City-St-Zip: KISSIMMEE, FL 34741

Title: MGRM () Delete
Name: PALAZZOLO, MARK R
Address: 1160 CYPRESS GLEN CIRCLE
City-St-Zip: KISSIMMEE, FL 34741

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHAEL DENARDIS

DR.

10/27/2009

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