

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000085266

Entity Name: 1632 PARK AVENUE, LLC

FILED
Nov 30, 2009
Secretary of State

Current Principal Place of Business:

4244 ST. JOHNS AVENUE
JACKSONVILLE, FL 32210

New Principal Place of Business:

50 NORTH LAURA STREET
SUITE 2200
JACKSONVILLE, FL 32202

Current Mailing Address:

4244 ST. JOHNS AVENUE
JACKSONVILLE, FL 32210

New Mailing Address:

50 NORTH LAURA STREET
SUITE 2200
JACKSONVILLE, FL 32202

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:

BARKER & BARKER, P.A.
4244 ST. JOHNS AVENUE
JACKSONVILLE, FL 32210 US

Name and Address of New Registered Agent:

BARKER, MICHAEL J ESQ.
50 NORTH LAURA STREET
SUITE 2200
JACKSONVILLE, FL 32202 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 J. BARKER

11/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BARKER & BARKER, P.A.
Address: 4244 ST. JOHNS AVENUE
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BARKER, MICHAEL J ESQ.
Address: 50 NORTH LAURA STREET, SUITE 2200
City-St-Zip: JACKSONVILLE, FL 32202

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 J. BARKER

MGR

11/30/2009

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