

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000094446

FILED
Sep 29, 2009
Secretary of State

Entity Name: THE HARVEST GROUP LLC

Current Principal Place of Business:

7563 PHILLIPS HWY
207
JACKSONVILLE, FL 32256 US

Current Mailing Address:

7563 PHILLIPS HWY
207
JACKSONVILLE, FL 32256 US

New Principal Place of Business:

8025 BAYMEADOWS CIR E
103
JACKSONVILLE, FL 32256 US

New Mailing Address:

PO BOX 1213
STARKE, FL 32091 US

FEI Number: 87-0765303 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:

WADE, TIMOTHY R
8025 BAYMEADOWS CIR. E.
103
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

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: TIMOTHY R WADE

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WADE, LATONIA
Address: 7563 PHILLIPS HWY SUITE 207
City-St-Zip: JACKSONVILLE, FL 32256 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: WADE, LATONIA
Address: 8025 BAYMEADOWS CIR E #103
City-St-Zip: JACKSONVILLE, FL 32256 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: LATONIA WADE

MGR

09/29/2009

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