

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000117844

FILED
Oct 05, 2009
Secretary of State

Entity Name: CROWN REALTY CONSULTANTS, LLC

Current Principal Place of Business:

204 37TH AVENUE NORTH
SUITE 421
SAINT PETERSBURG, FL 33703 US

New Principal Place of Business:

Current Mailing Address:

204 37TH AVENUE NORTH
SUITE 421
SAINT PETERSBURG, FL 33703 US

New Mailing Address:

FEI Number: 30-0522988 **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:

RENWANZ, STEVEN J
4052 EAGLE COVE WEST DR.
PALM HARBOR, FL 34685 US

Name and Address of New Registered Agent:

NAPLES, GERALD S
1951 KENTUCKY AVE NE
SAINT PETERSBURG, FL 33703 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: GERALD NAPLES

10/05/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: RENWANZ, STEVEN J
Address: 4052 EAGLE COVE WEST DR.
City-St-Zip: PALM HARBOR, FL 34685 US

Title: MGR () Delete
Name: NAPLES, GERALD S
Address: 1951 KENTUCKY AVENUE NE
City-St-Zip: SAINT PETERSBURG, FL 33703 US

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: GERALD NAPLES

MGR

10/05/2009

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