

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000085860

**FILED**  
**Oct 04, 2010**  
**Secretary of State**

**Entity Name:** RESIDENTIAL CONCEPTS BY WOLFE, LLC

**Current Principal Place of Business:**

405 34TH STREET  
WEST PALM BEACH, FL 33407

**New Principal Place of Business:**

405 34TH STREET  
WEST PALM BEACH, FL 33407 US

**Current Mailing Address:**

405 34TH STREET  
WEST PALM BEACH, FL 33407

**New Mailing Address:**

405 34TH STREET  
WEST PALM BEACH, FL 33407 US

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

EDWARDS, M. CHRIS  
264 CRANE POINT SOUTH  
JUPITER, FL 33458 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: M. CHRIS EDWARDS, REGISTERED AGENT

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: WOLFE, ARNOLD  
Address: 405 34TH STREET  
City-St-Zip: WEST PALM BEACH, FL 33407 US

I hereby 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: ARNOLD WOLFE

MGR

10/04/2010

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