

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 SEP 29 AM 10:54

DOCUMENT # M00000001232 <small>Entity Name</small> JFB-VILLAGE, L.L.C.			
<small>Principal Place of Business</small> 100 CENTERVIEW DRIVE, SUITE 200 BIRMINGHAM, AL 35216		<small>Mailing Address</small> 100 CENTERVIEW DRIVE, SUITE 200 BIRMINGHAM, AL 35216	
2. Principal Place of Business 1930 Stonegate DR <small>Suite, Apt. #, etc.</small>		3. Mailing Address 1930 Stonegate DR <small>Suite, Apt. #, etc.</small>	
<small>City & State</small> Birmingham AL <small>Zip</small> 35242 <small>Country</small>		<small>City & State</small> Birmingham AL <small>Zip</small> 35242 <small>Country</small>	
4. FEI Number 63-1252679		<small>Applied For</small> <input type="checkbox"/> \$5.00 Additional Fee Required <input checked="" type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required		6. Name and Address of Current Registered Agent PANICO, JAMES P ESQ. 111 S. MAITLAND AVE. MAITLAND, FL 32751	
7. Name and Address of New Registered Agent <small>Name</small> <small>Street Address (P.O. Box Number is Not Acceptable)</small> <small>City</small> FL <small>Zip Code</small>		8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>		<small>(NOTE: Registered Agent signature required when reinstating)</small> <small>DATE</small> _____	
FILE NOW!!! FEE IS \$50.00 <small>After January 1, 2007, Fee will be \$100.00</small>		<small>In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.</small>	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	M BAREFIELD, J. FRANK JR 100 CENTERVIEW DR., STE 200 BIRMINGHAM, AL 35216	<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1930 Stonegate DR Birmingham AL 35242
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<input type="checkbox"/> Delete	<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<input type="checkbox"/> Change <input type="checkbox"/> Addition 700080308387 09/29/06--01054--018 **50.00
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<input type="checkbox"/> Delete	<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<input type="checkbox"/> Delete	<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<input type="checkbox"/> Delete	<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<input type="checkbox"/> Change <input type="checkbox"/> Addition REINSTATEMENT 2006
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<input type="checkbox"/> Delete	<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		FRANK BAREFIELD 9/25/06 205 397 2289 <small>Date</small> <small>Daytime Phone #</small>	