

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M04000002224

FILED
May 02, 2006
Secretary of State

Entity Name: CMU INVESTMENT MANAGEMENT, LLC

Current Principal Place of Business:

20 BOUGANVILLEA ST.
COCOA BEACH, FL 32931

New Principal Place of Business:

245 STEWART DRIVE
MERRITT ISLAND, FL 32952

Current Mailing Address:

20 BOUGANVILLEA ST.
COCOA BEACH, FL 32931

New Mailing Address:

245 STEWART DRIVE
MERRITT ISLAND, FL 32952

FEI Number: 11-3649173 **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:

UNDERBRINK, CHARLES E
20 BOUGANVILLEA ST.
COCOA BEACH, FL 32931 US

Name and Address of New Registered Agent:

UNDERBRINK, CHARLES E
245 STEWART DRIVE
MERRITT ISLAND, FL 32952 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: CHARLES E. UNDERBRINK

05/02/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: UNDERBRINK, CHARLES E
Address: 20 BOUGANVILLEA ST.
City-St-Zip: COCOA BEACH, FL 32931

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: UNDERBRINK, CHARLES E
Address: 245 STEWART DRIVE
City-St-Zip: MERRITT ISLAND, FL 32952

I hereby certify that the information supplied with this filing does not qualify for the 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: CHARLES E. UNDERBRINK

MGR

05/02/2006

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