2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M05000003180

Entity Name: FMP TALLAHASSEE LLC

FILED Oct 04, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2201 E. CAMELBACK RD STE 350 PHOENIX, AZ 85016 **New Mailing Address: Current Mailing Address:** 2201 E. CAMELBACK RD STE 350 PHOENIX, AZ 85016 FEI Number: 20-2710183 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: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: RICHARD E. DEUTCH Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition MGR () Delete FELDMAN, LAWRENCE Name: Name: 1010 NORTHERN BLVD., SUITE 314 Address: Address: City-St-Zip: GREAT NECK, NY 11021 City-St-Zip: Title: MGR () Delete Title: MGR (X) Change () Addition BOURG, JAMES Name: BOURG, JAMES Name: Address: 3225 NORTH CENTRAL AVENUE, SUITE 1205 Address: 2201 E. CAMELBACK ROAD, SUITE 350 City-St-Zip: PHOENIX, AZ 85012 City-St-Zip: PHOENIX, AZ 85016 Title: MGR () Delete Title: MGR (X) Change () Addition JENSEN, SCOTT JENSEN, SCOTT Name: Name: 3225 NORTH CENTRAL AVENUE, SUITE 1205 2201 E. CAMELBACK ROAD, SUITE 350 Address: Address: City-St-Zip: PHOENIX, AZ 85012 City-St-Zip: PHOENIX, AZ 85016 Title: MGR () Delete Title: () Change () Addition Name: WIRTH, THOMAS Name: 1010 NORTHERN BLVD., SUITE 314 Address: Address: City-St-Zip: GREAT NECK, NY 11021 City-St-Zip: Title: MGR (X) Delete Title: () Change () Addition ERHART, JEFFREY Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: LARRY FELDMAN MGR 10/04/2007

3225 NORTH CENTRAL AVENUE, SUITE 1205

PHOENIX, AZ 85012

Address:

City-St-Zip: