

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M05000004734

FILED
Oct 05, 2007
Secretary of State

Entity Name: COBBLESTONE GROUP, LLC

Current Principal Place of Business:

FIVE SYLVAN ROAD SOUTH
WESTPORT, CT 06880

New Principal Place of Business:

Current Mailing Address:

FIVE SYLVAN ROAD SOUTH
WESTPORT, CT 06880

New Mailing Address:

FEI Number: 20-1006682 **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:

PENDLETON, LARRY
28900 TRENTON COURT
BONITA SPRINGS, FL 34134 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: LARRY PENDLETON

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SMITH, LOU-ANN
Address: 21 POWDERHORN DRIVE
City-St-Zip: RIDGEFIELD, CT 06877

Title: MGRM () Delete
Name: SICKINEER, TIMOTHY
Address: 17 BIRCH RD
City-St-Zip: DARIEN, CT 06820

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: SICKINGER, TIMOTHY
Address: 17 BIRCH RD
City-St-Zip: DARIEN, CT 06820

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: LOU-ANN SMITH

MGMR

10/05/2007

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