

# 2011 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M06000006370

**FILED**  
**Jun 15, 2011**  
**Secretary of State**

**Entity Name:** ST. ISABEL STREET ACQUISITION, LLC

**Current Principal Place of Business:**

120 PRESTON EXECUTIVE DRIVE  
SUITE 200  
CARY, NC 27513

**New Principal Place of Business:**

1010 HIGH HOUSE ROAD  
SUITE 300  
CARY, NC 27513

**Current Mailing Address:**

120 PRESTON EXECUTIVE DRIVE  
SUITE 200  
CARY, NC 27513

**New Mailing Address:**

1010 HIGH HOUSE ROAD  
SUITE 300  
CARY, NC 27513

FEI Number: 20-5600037

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

KING, ROBERT  
550 NORTH RIO STREET, SUITE 200  
TAMPA, FL 33609 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: ROBERT KING

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: OAKS, MAXWELL M  
Address: 1010 HIGH HOUSE RD, SUITE 300  
City-St-Zip: CARY, NC 27513

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: MAXWELL M OAKS

MGR

06/15/2011

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