

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M06000006611

FILED
Nov 26, 2008
Secretary of State

Entity Name: CAVOLINO 575, LLC

Current Principal Place of Business:

2125 TANGLEWOOD WAY NE
ST PETERSBURG, FL 33702

New Principal Place of Business:

220 108TH AVENUE, UNIT 303
TREASURE ISLAND, FL 33706 US

Current Mailing Address:

2125 TANGLEWOOD WAY NE
ST PETERSBURG, FL 33702

New Mailing Address:

220 108TH AVENUE, UNIT 303
TREASURE ISLAND, FL 33706 US

FEI Number: 20-5714868 **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:

FROST, WILLIAM
2125 TANGLEWOOD WAY NE
ST PETERSBURG, FL 33702 US

Name and Address of New Registered Agent:

FROST, WILLIAM
220 108TH AVENUE, UNIT 303
TREASURE ISLAND, FL 33706 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: WILLIAM FROST

11/26/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: F4 CAPITAL MANAGEMEN, T, LLC
Address: 2125 TANGLEWOOD WAY NE
City-St-Zip: ST PETERSBURG, FL 33702

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: F4 CAPITAL MANAGEMEN, T, LLC
Address: 220 108TH AVENUE, UNIT 303
City-St-Zip: TREASURE ISLAND, FL 33706

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: WILLIAM FROST

PRES

11/26/2008

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