

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M07000001832

Entity Name: GINN BULOW SHORES, LLC

FILED
Oct 28, 2009
Secretary of State

Current Principal Place of Business:

31 LUPI COURT
ATTN: LEGAL DEPARTMENT
PALM COAST, FL 32137 US

Current Mailing Address:

31 LUPI COURT
ATTN: LEGAL DEPARTMENT
PALM COAST, FL 32137 US

New Principal Place of Business:

ONE HAMMOCK BEACH PARKWAY
2ND FLOOR
PALM COAST, FL 32137 US

New Mailing Address:

ONE HAMMOCK BEACH PARKWAY
2ND FLOOR
PALM COAST, FL 32137 US

FEI Number: 20-8724225

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEMARTIN, CHARLES P ESQ
31 LUPI COURT
ATTN: LEGAL DEPARTMENT
PALM COAST, FL 32137 US

Name and Address of New Registered Agent:

DEMARTIN, CHARLES P ESQ
ONE HAMMOCK BEACH PARKWAY
2ND FLOOR
PALM COAST, FL 32137 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 P. DEMARTIN

10/28/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MASTERS, II, ROBERT F
Address: 31 LUPI COURT; ATTN: LEGAL DEPARTMENT
City-St-Zip: PALM COAST, FL 32137 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GINN, III, EDWARD R
Address: ONE HAMMOCK BEACH PARKWAY, 2ND FLOOR
City-St-Zip: PALM COAST, FL 32137 US

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: EDWARD R. GINN, III

MGR

10/28/2009

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