

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M07000006240

FILED
Jun 12, 2009
Secretary of State

Entity Name: REGAN WARD PROPERTIES LLC

Current Principal Place of Business:

1330 WARWICK HIGHWAY
ASHBURN, GA 31714

New Principal Place of Business:

3726 SW 40TH BLVD
GAINESVILLE, FL 32608

Current Mailing Address:

1330 WARWICK HIGHWAY
ASHBURN, GA 31714

New Mailing Address:

2839 PACES FERRY ROAD, STE 560
ATLANTA, GA 30339

FEI Number: 26-1251794 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:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

THE CABOT LODGE
3726 SW 40TH BLVD
GAINESVILLE, FL 32608 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: THE CABOT LODGE

06/12/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WARD, JIMMIE ANN
Address: 1330 WARWICK HIGHWAY
City-St-Zip: ASHBURN, GA 31714

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGR () Change (X) Addition
Name: BOWEN, WILLIAM D
Address: 2839 PACES FERRY ROAD, STE 560
City-St-Zip: ATLANTA, GA 30339

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 D BOWEN

MGR

06/12/2009

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