

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M08000004336

Entity Name: HOSKINS RANCH, LLC

FILED
Nov 17, 2009
Secretary of State

Current Principal Place of Business:

550 NORTH TOUCHET ROAD
DAYTONA, WA 99328

New Principal Place of Business:

550 NORTH TOUCHET ROAD
DAYTON, WA 99328

Current Mailing Address:

550 NORTH TOUCHET ROAD
DAYTONA, WA 99328

New Mailing Address:

550 NORTH TOUCHET ROAD
DAYTON, WA 99328

FEI Number: 20-1415682 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CT CORPORATION SYSTEM

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HOSKINS, W. CONRAD
Address: 550 NORTH TOUCHET ROAD
City-St-Zip: DAYTONA, WA 99328

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

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: HOSKINS, W. CONRAD
Address: 550 NORTH TOUCHET ROAD
City-St-Zip: DAYTON, WA 99328

Title: MGR () Change (X) Addition
Name: HOSKINS, BENJAMIN
Address: 2800 QUARRY LAKE DRIVE, SUITE 320
City-St-Zip: BALTIMORE, MD 21209

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: BENJAMIN HOSKINS

MGR

11/17/2009

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