## 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# Z00402

Entity Name: CHARGER MANAGEMENT GROUP, L.C.

FILED Sep 29, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX CB10974 ONE NORTH CLEMATIS STREET

CONCHREST 8D SUITE 305

NASSAU, BAHAMAS, XX WEST PALM BEACH, FL 33401 XX

Current Mailing Address: New Mailing Address:

P.O. BOX CB10974 ONE NORTH CLEMATIS STREET

CONCHREST 8D SUITE 305

NASSAU, BAHAMAS, XX WEST PALM BEACH, FL 33401

FEI Number: 65-0268563 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

KOSOY, BRIAN D.
ONE NORTH CLEMATIS ST
STE 305

WEST PALM BEACH, FL 33401 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: BRIAN KOSOY

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name:KOSOY, COLLEEN,Name:KOSOY, COLLEEN,Address:P.O. BOX CB10974 CONCHREST 8DAddress:CB10974 CONCHREST 8DCity-St-Zip:NASSAU, BAHAMAS, BHCity-St-Zip:NASSAU, BAHAMAS, BH

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 KOSOY, DAVID,
 Name:

 Address:
 P.O. BOX CB10974 CONCHREST 8D
 Address:

 City-St-Zip:
 NASSAU, BAHAMAS, BH
 City-St-Zip:

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: DAVID KOSOY MGRM 09/29/2008