### 2005 LIMITED LIABILITY COMPANY

## DOCUMENT # L01000006392

1. Entity Name

RE ACQUISITIONS SAMPLE, LLC



FILED
May 02, 2005 08:00 AM
Secretary of State

Principal Place of Business

730 WEST BROWARD BLVD FT. LAUDERDALE, FL 33312 Mailing Address

730 WEST BROWARD BLVD FT. LAUDERDALE, FL 33312



#### DO NOT WRITE IN THIS SPACE

04282005No Chg-LLC CR2E083 (10/03)

4. FEI Number 65-1095481

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

5. Name and Address of Current Registered Agent

SCHOLL, GEORGE H 730 W BROWARD BLVD. FT LAUDERDALE, FL 33312

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8. The	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. I am familiar with, and accepted above named and agent agent.		
SKGNA	Signature, typed or printed series of registered agen; and bits & applicable.	(NOTTE: Registered Agent agrature required when reinstalling)	DATE
	Filing Fee is \$50.00 Due by May 1, 2005		
9.	MANAGING MEMBERS/MANAGERS		

· .	a. MANAGING INEVIDERS/INANAGERS	
TITLE NAME STREET ADDRESS CITY+ST-ZIP	MGRM DENBERG, ROBERT L 730 W. BROWARD BLVD FT. LAUDERDALE, FL 33312	
TITS F NAME STREET ADDRESS CSTY-ST-7IP	MGRM SCHOLL, GEORGE H 730 W. BROWARD BLVD FT. LAUDERDALE, FL 33312	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this report is true and accurate and that the 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 employeed to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4.28.05

954-522-366

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