



# 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 JUN -2 AM 8:28

DOCUMENT # L03000027898					
1. Entity Name NORTHEAST 40TH, LLC					
Principal Place of Business 208 EAST OCEAN AVENUE LANTANA, FL 33462 US			Mailing Address 208 EAST OCEAN AVENUE LANTANA, FL 33462 US		
2. Principal Place of Business <b>40 NE 40 ST</b>		3. Mailing Address <b>40 NE 40 ST.</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State <b>MIAMI FLORIDA</b>		City & State <b>MIAMI FL</b>		4. FEI Number <b>11-3701121</b>	
Zip <b>33137</b>		Country <b>USA</b>		Applied For Not Applicable	
Zip <b>33137</b>		Country <b>USA</b>		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$5.00 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301			7. Name and Address of New Registered Agent		
			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			REINSTATEMENT 04-05		
			City <b>MIAMI</b>		State <b>FL</b>
			Zip Code		
8. 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 accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$200.00</b>			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
			<b>PRESIDENT ARIEL D. SANS 12 LITTLE POND POINT MANALAPAN, FL 33062</b>		
			<b>VICE PRESIDENT ALEJANDRO D. SANS 1523 CONSOLATA AVE CORAL GABLES FL 33166</b>		
			<b>SECRETARY VINCENT C. MOTZEL 12 LITTLE POND POINT MANALAPAN, FL 33462</b>		
			<b>500055667945 06/02/05--01059--001 ***205.00</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 my 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:  <b>ALEJANDRO D. SANS</b> <span style="float: right;">6/1/05 305-573-0554</span>					
<small>SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					
<small>Date</small>					
<small>Daytime Phone #</small>					