

**2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

**FILED  
Nov 02, 2007  
Secretary of State**

DOCUMENT# L04000071356

Entity Name: FAYBERN LIGHT LLC

**Current Principal Place of Business:**

ONE SANFORD COURT  
NORTH WOODMERE, NY 11581

**New Principal Place of Business:**

**Current Mailing Address:**

ONE SANFORD COURT  
NORTH WOODMERE, NY 11581

**New Mailing Address:**

FEI Number: 20-1725143      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:**

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

INCORPORATING SERVICES, LTD.  
1540 GLENWAY DRIVE  
TALLAHASSEE, FL 32301      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: ANNA BARNETT-TIRNAUER

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: TIRNAUER, MONROE H  
Address: ONE SANFORD COURT  
City-St-Zip: NORTH WOODMERE, NY 11581

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

Title: MGRM ( ) Delete  
Name: BARNETT-TIRNAUER, ANNA  
Address: ONE SANFORD COURT  
City-St-Zip: NORTH WOODMERE, NY 11581

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: ANNA BARNETT-TIRNAUER

MGRM

11/02/2007

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