



2007 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED

2007 MAR 27 AM 9:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L05000032276			
1. Entity Name PISUT LLC			
Principal Place of Business 6951 LAKE ISLAND DRIVE LAKEWORTH, FL 33467 US		Mailing Address 6951 LAKE ISLAND DRIVE LAKEWORTH, FL 33467 US	
2. Principal Place of Business - Mail P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc. 366 N. Congress Ave		Suite, Apt. #, etc. 366 N. Congress Ave	
City & State Boynton Beach FL		City & State Boynton Beach FL	
Zip 33426	Country U.S.A	Zip 33426	Country U.S.A
4. FRENCH NUMBER		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
20-2612366		<input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent		7. Name and Address of new Registered Agent	
AMPAIPISUTSAKUL, SOMJAI 6951 LAKE ISLAND DRIVE LAKEWORTH, FL 33467		Name AMPAIPISUTSAKUL, SOMJAI	
		Street Address (P.O. Box Number is Not Applicable) 366 N. Congress Ave	
		City Boynton Beach FL Zip Code 33426	
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 <i>Somjai Ampaipitsakul</i>		DATE 03/23/07	
SIGNATURE, TYPE OR PRINTED NAME OF REGISTERED AGENT AND USE IF APPLICABLE.		(NOTE: Registered Agent signature required when reinstating)	
FILE NOW!!! FEE IS \$150.00		In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the profit/loss.	
Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM AMPAIPISUTSAKUL, SOMJAI 6951 LAKE ISLAND DRIVE LAKEWORTH, FL 33467 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM AMPAIPISUTSAKUL, SOMJAI 366 N. Congress Ave Boynton Beach FL 33426 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SUCHINPARN, CHANINUN 6951 LAKE ISLAND DRIVE LAKEWORTH, FL 33467 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SUCHINPARN, CHANINUN 366 N. Congress Ave Boynton Beach, FL 33426 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <i>Somjai Ampaipitsakul</i>		DATE 03/23/07	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		DATE	
		DATE/TIME PHONE #	



03232007 REIN-LLC CR2E101 (1/07)

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