

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000025233

FILED
Dec 17, 2007
Secretary of State

Entity Name: BLUE STONE USA, L.L.C.

Current Principal Place of Business:

4340 SHERIDAN STREET, SECOND FLOOR
HOLLYWOOD, FL 33021

New Principal Place of Business:

10796 PINES BLVD
SUITE 204
PEMBROKE PINES, FL 33026 US

Current Mailing Address:

4340 SHERIDAN STREET, SECOND FLOOR
HOLLYWOOD, FL 33021

New Mailing Address:

10796 PINES BLVD
SUITE 204
PEMBROKE PINES, FL 33026 US

FEI Number: 20-4454319 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

SERFATY, CHARLES S ESQ
4340 SHERIDAN STREET, SECOND FLOOR
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

MOYAL, PATRICK
10796 PINES BLVD
SUITE 204
PEMBROKE PINES, FL 33026 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: PATRICK MOYAL

12/17/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: DAIAN, ALEX
Address: 4340 SHERIDAN STREET, SECOND FLOOR
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: DAIAN, ALEX
Address: 10796 PINES BLVD SUITE 204
City-St-Zip: PEMBROKE PINES, FL 33026 US

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: ALEX DAIAN

MGR

12/17/2007

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