2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000066180

BUDKO, POLINA

2500 PARKVIEW DRIVE, SUITE 2518

HALLANDALE BEACH, FL 33099

Name:

Address:

City-St-Zip:

Entity Name: DESIGN AND TECHNOLOGY LLC

FILED Oct 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2500 PARKVIEW DRIVE, SUITE 2518 HALLANDALE BEACH, FL 33099 **Current Mailing Address: New Mailing Address:** 2500 PARKVIEW DRIVE, SUITE 2518 HALLANDALE BEACH, FL 33099 FEI Number: 32-0256014 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: Name and Address of New Registered Agent: SPIEGEL & UTRERA, P.A. **GLAZER BRONYA** 1840 SW 22ND ST. 26 DIPLOMAT PARKWAY 4TH FLOOR US HALLANDALE, FL 33009 MIAMI, FL 33145 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: BRONYA GLAZER 10/14/2009 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete ABOVSKAYA, LILIYA Name: Name: Address: 2500 PARKVIEW DRIVE, SUITE 2518 Address: City-St-Zip: HALLANDALE BEACH, FL 33099 City-St-Zip: Title: MGR () Delete Title: () Change () Addition BUDKO, POLINA Name: Name: Address: 2500 PARKVIEW DRIVE, SUITE 2518 Address: City-St-Zip: HALLANDALE BEACH, FL 33099 City-St-Zip: Title: (X) Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: LILIYA ABOVSKAYA MNR 10/14/2009