

**2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

**FILED  
Oct 21, 2011  
Secretary of State**

DOCUMENT# L10000052342

Entity Name: MACCABI, LLC

**Current Principal Place of Business:**

3201 NE 183 STREET, SUITE 2208  
AVENTURA, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

3201 NE 183 STREET, SUITE 2208  
AVENTURA, FL 33160

**New Mailing Address:**

FEI Number: 80-0600088

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

ROSEN, JEFFREY  
3201 NE 183 STREET, SUITE 2208  
AVENTURA, FL 33160 US

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

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: JEFFREY ROSEN

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ROSEN, JEFFREY  
Address: 3201 NE 183 STREET, SUITE 2208  
City-St-Zip: AVENTURA, FL 33160

I hereby 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: JEFFREY ROSEN

MGR

10/21/2011

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