

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000071095

FILED
Oct 17, 2006
Secretary of State

Entity Name: INDIAN ROAD PROPERTIES LLC

Current Principal Place of Business:

328 EAST SHADYSIDE CIRCLE
WEST PALM BEACH, FL 33409

New Principal Place of Business:

328 EAST SHADYSIDE CIRCLE
WEST PALM BEACH, FL 33415

Current Mailing Address:

328 EAST SHADYSIDE CIRCLE
WEST PALM BEACH, FL 33409

New Mailing Address:

328 EAST SHADYSIDE CIRCLE
WEST PALM BEACH, FL 33415

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

LESCHER, GERALD S ESQ.
1555 PALM BEACH LAKES BLVD SUITE 1510
WEST PALM BEACH, FL 33401 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: GERALD LESCHER

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: VALENZIANO, SALVATORE J TRUSTEE
Address: 328 EAST SHADYSIDE CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: MGRM (X) Change () Addition
Name: VALENZIANO, SALVATORE J TRUSTEE
Address: 328 EAST SHADYSIDE CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33415

I hereby certify that the information supplied with this filing does not qualify for the 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: SALVATORE VALENZIANO

MGRM

10/17/2006

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