2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 13, 2009
Secretary of State

DOCUMENT# L04000064599

Entity Name: SAFETY TUBS HOLDINGS, LLC

Current Principal Place of Business:

C/O LAMONT NEIMAN INTERIAN & BELLET, P.A.
2 S. BISCAYNE BLVD., STE. 3550
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

C/O LAMONT NEIMAN INTERIAN & BELLET, P.A.
2 S. BISCAYNE BLVD., STE. 3550
MIAMI, FL 33131

New Mailing Address:

FEI Number: 51-0522755 **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:

LAMONT NEIMAN INTERIAN & BELLET, P.A.
2 S. BISCAYNE BLVD., STE. 3550
MIAMI, FL 33131 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: JAN S. NEIMAN, ESQ. SECRETARY

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: NEIDICH, ANDRE J
Address: 23415 DRAYTON DRIVE
City-St-Zip: BOCA RATON, FL 33433

Title: MGR ( ) Delete
Name: REBECCA, NEIDICH S
Address: 23415 DRAYTON DRIVE
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: ANDRE NEIDICH MNGR 10/13/2009

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