

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000090723

Entity Name: DISCOUNT SOURCE LLC

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

315 S.E. MIZNER BLVD.  
207  
BOCA RATON, FL 33432 US

## **New Principal Place of Business:**

4790 N. POWERLINE RD  
POMPANO BEACH, FL 33073 US

## **Current Mailing Address:**

315 S.E. MIZNER BLVD.  
207  
BOCA RATON, FL 33432 US

## **New Mailing Address:**

4790 N. POWERLINE RD  
POMPANO BEACH, FL 33073 US

FEI Number: 26-3432662

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

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

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

PATRICK VIVIES CPA PA  
700 E DANIA BEACH BLVD  
SUITE 202  
DANIA, FL 33004 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 VIVIES

03/15/2011

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: COHEN, LAURENT E  
Address: 4790 N. POWERLINE RD  
City-St-Zip: POMPANO BEACH, FL 33073 US

Title: MGR  
Name: HALFON, KIKI  
Address: 4790 N POWERLINE RD  
City-St-Zip: POMPANO BEACH, FL 33073

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: LAURENT COHEN

MGR

03/15/2011

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