

**2018 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L17000210499

**Entity Name:** 3527 NE 168 ST 409 LLC

**Current Principal Place of Business:**

1439 N LAKE DR  
LAKEWOOD, NJ 08701

**Current Mailing Address:**

1439 N LAKE DR  
LAKEWOOD, NJ 08701

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

HAYON, ILAN  
9619 CLEMMONS ST  
PARKLAND, FL 33076 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:** ILAN HAYON

11/08/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name ZUCKERMAN, JONATHAN  
Address 1439 N LAKE DR  
City-State-Zip: LAKEWOOD NJ 08701

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JONATHAN ZUCKERMAN

MEMBER

11/08/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date