

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 708071

FILED
Oct 27, 2004
Secretary of State**Entity Name:** 915 LENOX, INC., A CONDOMINIUM**Current Principal Place of Business:**915 LENOX AVE.
APT 102
MIAMI BEACH, FL 33139 US**Current Mailing Address:**915 LENOX AVE.
APT 102
MIAMI BEACH, FL 33139 US**New Principal Place of Business:**915 LENOX AVE.
APT 206
MIAMI BEACH, FL 33139 US**New Mailing Address:**915 LENOX AVE.
APT 206
MIAMI BEACH, FL 33139 US**FEI Number:** 59-2491461**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MCLAUGHLIN, JOHN
915 LENOX AVE. 106
MIAMI BEACH, FL 33139 US**Name and Address of New Registered Agent:**MCLAUGHLIN, JOHN
915 LENOX AVE. 201
MIAMI BEACH, FL 33139 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: JOHN MCLAUGHLIN

10/27/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** SD () Delete
Name: LACHANCE, KRISTEN
Address: 915 LENOX AVE #206
City-St-Zip: MIAMI BEACH, FL 33139**Title:** TD () Delete
Name: KUZNIETZ, FERNANDO,
Address: 915 LENOX AVE #102
City-St-Zip: MIAMI, FL 33139**Title:** PD () Delete
Name: MCLAUGHLIN, JOHN
Address: 915 LENOX AVE 201
City-St-Zip: MIAMI BEACH, FL 33139**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** TD (X) Change () Addition
Name: LACHANCE, KRISTEN
Address: 915 LENOX AVE #206
City-St-Zip: MIAMI BEACH, FL 33139**Title:** SC (X) Change () Addition
Name: KUZNIETZ, FERNANDO,
Address: 915 LENOX AVE #102
City-St-Zip: MIAMI, FL 33139**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KRISTEN LACHANCE

TD

10/27/2004

Electronic Signature of Signing Officer or Director

Date