


# 2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED

2006 NOV 27 AM 10:55

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>DOCUMENT # F05000001481</b>			
1. Entity Name LAST MILE CONNECTIONS, INC.			
Principal Place of Business 61 BROADWAY, STE 2220 NEW YORK, NY 10006		Mailing Address 61 BROADWAY, STE 2220 NEW YORK, NY 10006	
2. Principal Place of Business 525 WASHINGTON BLVD.		3. Mailing Address 525 WASHINGTON BLVD.	
Suite, Apt. #, etc. 9th FL.		Suite, Apt. #, etc. 9th FL.	
City & State JERSEY CITY, NJ		City & State JERSEY CITY, NJ	
Zip 07310		Country USA	
4. FEI Number 74-3028380		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NATIONAL CORPORATE RESEARCH, LTD., INC. 515 E. PARK AVE. TALLAHASSEE, FL 32301		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE <i>Rita Meloni, Asst Sec.</i>		DATE 10/31/06	
FILE NOW!!! FEE IS \$150.00 After January 1, 2007, Fee will be \$300.00		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP * DIRECTOR WALSH, DAVID TELERATO, 233 BROADWAY, 24TH FLOOR NEW YORK, NY 10279		TITLE NAME STREET ADDRESS CITY-ST-ZIP PRESIDENT/CEO RONALD LEMAY Rippl Wood Holdings LLC One Rockefeller Plaza, 32nd FL. NEW YORK, NY 10020	
TITLE NAME STREET ADDRESS CITY-ST-ZIP D AUSTER, CHARLES ONE EQUITY PARTNERS, 320 PARK AVE, 18FLOOR NEW YORK, NY 10022		TITLE NAME STREET ADDRESS CITY-ST-ZIP 400092135364 11/29/06--01025--023 **150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP D CASHIN, RICHARD ONE EQUITY PARTNERS, 320 PARK AVE, 18FLOOR NEW YORK, NY 10022		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP P MARTINO, JAMES 61 BROADWAY, STE 2220 NEW YORK, NY 10006		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP VP RIEDEL, ROBERT 61 BROADWAY, STE 2220 NEW YORK, NY 10006		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP S MERCER, ROBERT 61 BROADWAY, STE 2220 NEW YORK, NY 10006		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>[Signature]</i>		Date 10/26/06	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone # 646-835-4971	

11/28/06