

# 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L00000014656

FILED  
May 20, 2005  
Secretary of State

Entity Name: PREMIERE BUSINESS OFFICES, LLC

**Current Principal Place of Business:**

500 E BROWARD BLVD  
18TH FLOOR  
FT LAUDERDALE, FL 33394

**New Principal Place of Business:**

**Current Mailing Address:**

401 EAST LAS OLAS BLVD  
SUITE 1400  
FT LAUDERDALE, FL 33394

**New Mailing Address:**

FEI Number: 65-1061577      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DIAMOND, NICK  
601 EAST LAS OLAS BLVD  
SUITE 1400  
FORT LAUDERDALE, FL 33394 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: NICK DIAMOND

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: SNORP, P  
Address: 100 NE WAVE CREST CT.  
City-St-Zip: BOCA RATON, FL 33432

Title: MGR ( ) Delete  
Name: MOORE, RICHARD J  
Address: 1924 NE 31 AVE.  
City-St-Zip: FT. LAUDERDALE, FL 33325

Title: MGR ( ) Delete  
Name: MORRISON, R. SCOTT  
Address: 243 NE 5TH AVE.  
City-St-Zip: DELRAY BEACH, FL 33483

Title: MGR ( ) Delete  
Name: CORKIN, HERBERT  
Address: 445 GRAND BAY DR.  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: MGR ( ) Delete  
Name: DIAMOND, GERALD  
Address: 1713 S. OCEAN BLVD.  
City-St-Zip: DELRAY BEACH, FL 33483

Title: MGRM ( ) Delete  
Name: DIAMOND, R. NICHOLAS  
Address: 9720 NW 39TH CT.  
City-St-Zip: CORAL SPRINGS, FL 33065

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: SNOEP, PEER  
Address: 100 NE WAVE CREST CT.  
City-St-Zip: BOCA RATON, FL 33432

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

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

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

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 for the exemption stated in Section 119.07(3)(i), 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: PEER SNOEP

MGRM

05/20/2005

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