

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L01000009769

**FILED**  
**Jun 16, 2014**  
**Secretary of State**

**Entity Name:** INKA GRAND FLORIDA I, LLC

**Current Principal Place of Business:**

539 NORTH BIRCH ROAD  
FORT LAUDERDALE, FL 33304

**New Principal Place of Business:**

**Current Mailing Address:**

539 NORTH BIRCH ROAD  
FORT LAUDERDALE, FL 33304

**New Mailing Address:**

**FEI Number:** 65-1114949

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KOSLOWSKI, CASEY KARL  
539 NORTH BIRCH ROAD  
FORT LAUDERDALE, FL 33304 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: CASEY KOSLOWSKI

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

Title: P  
Name: KOSLOWSKI, CASEY  
Address: 539 N BIRCH RD  
City-St-Zip: FORT LAUDERDALE, FL 33304 US

Title: VP  
Name: KOSLOWSKI, INGRID  
Address: N76 W14934 CLARE DR.  
City-St-Zip: MENOMONEE FALLS, WI 53051

Title: T  
Name: KOSLOWSKI, KARL  
Address: N76 W14934 CLARE DR.  
City-St-Zip: MENOMONEE FALLS, WI 53051

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 authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: CASEY KOSLOWSKI

P

06/16/2014

Electronic Signature of Authorized Person

Date