

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L01000011902

FILED
Jul 06, 2006
Secretary of State

Entity Name: NINTH STREET ASSOCIATES, LLC

Current Principal Place of Business:

1276 50TH ST., 2ND FLOOR
SUITE 700
BROOKLYN, NY 11219

New Principal Place of Business:

Current Mailing Address:

1276 50TH ST., 2ND FLOOR
SUITE 700
BROOKLYN, NY 11219

New Mailing Address:

FEI Number: 11-3622927 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

FILINGS, INC.
3732 NORTHWEST 16TH ST.
FT LAUDERDALE, FL 33311 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: ARI PARNES

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PARNES, AARON
Address: 1276 50TH ST.
City-St-Zip: BROOKLYN, NY 11219

Title: MGRM () Delete
Name: PARNES, ARI
Address: 1276 50TH ST.
City-St-Zip: BROOKLYN, NY 11219

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PARNES, AARON
Address: 1276 50TH ST., ROOM 700
City-St-Zip: BROOKLYN, NY 11219

Title: MGRM (X) Change () Addition
Name: PARNES, ARI
Address: 1276 50TH ST., ROOM 700
City-St-Zip: BROOKLYN, NY 11219

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ARI PARNES

MGR

07/06/2006

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