

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L01000018924

Entity Name: MD CREATIONS LLC

FILED
Oct 18, 2005
Secretary of State

Current Principal Place of Business:

520 NW 89TH TERR
PEMBROKE PINES, FL 33024

New Principal Place of Business:

8362 PINES BLVD.
390
PEMBROKE PINES, FL 33024

Current Mailing Address:

8362 PINES BLVD STE 390
PEMBROKE PINES, FL 33024

New Mailing Address:

8362 PINES BLVD
SUITE 390
PEMBROKE PINES, FL 33024

FEI Number: 65-1151329 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:

TSIMOGIANNIS, JOHNNY
999 PONCE DE LEON BLVD
SUITE 601
CORAL GABLES, FL 33024 US

Name and Address of New Registered Agent:

TSIMOGIANNIS, LILY
8362 PINES BLVD.
SUITE 390
PEMBROKE PINES, FL 33024 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: LILY TSIMOGIANNIS

10/18/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: TSIMOGIANIS, JOHNNY
Address: 999 PONCE DE LEON BLVD STE 601
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR (X) Delete
Name: TSIMOGIANNIS, LILY
Address: 999 PONCE DE LEON BLVD STE 601
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: TSIMOGIANIS, LILY
Address: 8362 PINES BLVD
City-St-Zip: PEMBROKE PINES, FL 33024

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: LILY TSIMOGIANNIS

MGR

10/18/2005

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