

# **2006 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L01000018924

**Entity Name:** MD CREATIONS LLC

**FILED**  
**Oct 10, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

8362 PINES BLVD.  
390  
PEMBROKE PINES, FL 33024

**New Principal Place of Business:**

**Current Mailing Address:**

8362 PINES BLVD  
SUITE 390  
PEMBROKE PINES, FL 33024

**New Mailing Address:**

**FEI Number:** 65-1151329      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
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:**

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

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: TSIMOGIANNIS, LILY  
Address: 8362 PINES BLVD  
City-St-Zip: PEMBROKE PINES, FL 33024

**ADDITIONS/CHANGES:**

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 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: LILY TSIMOGIANNIS

MGR

10/10/2006

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