

2004 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L01000019469

FILED
Oct 29, 2004
Secretary of State

Entity Name: GOODSTEIN DEVELOPMENT FLORIDA, L.L.C.

Current Principal Place of Business:

12550 BISCAYNE BLVD
409
NORTH MIAMI, FL 33181

New Principal Place of Business:

C/O THE GOODSTEIN ORGANIZATION
212 EAST 47TH STREET, 3RD FLOOR
NEW YORK, NY 10017

Current Mailing Address:

12550 BISCAYNE BLVD
409
NORTH MIAMI, FL 33181

New Mailing Address:

C/O THE GOODSTEIN ORGANIZATION
212 EAST 47TH STREET, 3RD FLOOR
NEW YORK, NY 10017

FEI Number: 65-1158029 **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:

COHEN, SETH I ESQ
2500 N. MILITARY TRAIL
SUITE 111
BOCA RATON, FL 33431 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: GOODSTEIN, STEVEN
Address: 12550 BISCAYNE BLVD., STE 409
City-St-Zip: NORTH MIAMI, FL 33181

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GOODSTEIN, STEVEN
Address: 212 EAST 47TH STREET, 3RD FLOOR
City-St-Zip: NEW YORK, NY 10017

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: STEVEN GOODSTEIN

MGR

10/29/2004

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