

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L01000020244

Entity Name: NEWPART INVESTORS, L.L.C.

FILED
May 22, 2009
Secretary of State

Current Principal Place of Business:

1001 NW 12 TERR
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

1001 NW 12 TERR
POMPANO BEACH, FL 33069

New Mailing Address:

FEI Number: 60-0000112 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:

SALVADOR, HASBUN
1001 NW 12 TERR
POMPANO BEACH, FL 33069 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: SALVADOS HASBUN

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: SALVADOR, HASBUN
Address: 1001 NW 12 TERR
City-St-Zip: POMPANO BEACH, FL 33069

Title: VP () Delete
Name: JENNIFER, HASBUN
Address: 1001 NW 12TH TERRACE
City-St-Zip: POMPANO BEACH, FL 33069

Title: VP () Delete
Name: KEVIN, HASBUN
Address: 1001 NW 12TH TERRACE
City-St-Zip: POMPANO BEACH, FL 33069

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: SALVADOR HASBUN

P

05/22/2009

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