

**2005 LIMITED LIABILITY COMPANY REINSTATEMENT**

**FILED  
Oct 07, 2005  
Secretary of State**

DOCUMENT# L02000007863

Entity Name: BMS PARTNERS, LLC

**Current Principal Place of Business:**

4101 DAVIE ROAD EXTENSION  
DAVIE, FL 33024

**New Principal Place of Business:**

**Current Mailing Address:**

4101 DAVIE ROAD EXTENSION  
DAVIE, FL 33024

**New Mailing Address:**

FEI Number: 01-0650833      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:**

OSHEROFF, MARC A  
16400 N.W. 2ND AVE  
SUITE 203  
MIAMI, FL 33169 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: MARC A OSHEROFF

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: OSHEROFF, MARC A  
Address: 4101 DAVIE ROAD EXTENSION  
City-St-Zip: DAVIE, FL 33024

Title: MGRM ( ) Delete  
Name: NEHME, SAM  
Address: 4101 DAVIE ROAD EXTENSION  
City-St-Zip: DAVIE, FL 33024

Title: MGRM ( ) Delete  
Name: KATZ, DALE S  
Address: 4101 DAVIE ROAD EXTENSION  
City-St-Zip: DAVIE, FL 33024

**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 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: SAM NEHME

MGRM

10/07/2005

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