


# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

<b>DOCUMENT # L02000012027</b> 1. Entity Name J.W. HOLDINGS ENTERPRISE, LC		
Principal Place of Business 480 WASECA DR LANTANA, FL 33462		Mailing Address 480 WASECA DR LANTANA, FL 33462
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.	3. Mailing Address  Suite, Apt. #, etc.	
City & State		City & State
Zip	Country	Zip
Country		Country

FILED

2009 JAN -6 PM 3: 01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



12302008 REIN-LLC CR2E101 (1/07)

4. FEI Number 30-0189144	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired  **\$5.00** Additional Fee Required

<b>6. Name and Address of Current Registered Agent</b>  SPIEGEL & UTRERA, P.A. 1840 SOUTHWEST 22 STREET 4TH FLOOR MIAMI, FL 33145	<b>7. Name and Address of New Registered Agent</b> Name: <u>Wayne Wilber</u> Street Address (P.O. Box Number is Not Acceptable): <u>480 WASECA DR</u> City: <u>LANTANA FL, 33462</u> <b>FL</b> Zip Code: <u>33462</u>
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Wayne Wilber DATE: 12/29/08  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$138.75**  
**After January 1, 2009, Fee will be \$277.50**

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Make check payable to  
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR</b> <b>A QUALITY SECURITY CORP.</b> <b>480 WASECA DR</b> <b>LANTANA, FL 33462</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>70013953321</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>01/06/09--01013--010</b> <b>**138.75</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR</b> <b>AIRTRONICS SYSTEMS INC.</b> <b>3878 PROSPECT AVE. SUITE #5</b> <b>RIVIERA BEACH, FL 33404</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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REINSTATEMENT

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 606, Florida Statutes.

SIGNATURE: Wayne Wilber - Wayne Wilber DATE: 12/29/08 DAYTIME PHONE #: (561) 719-8730  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE