2005 LIMITED LIABILITY COMPANY REINSTATEMENT

REINSTATEMENT.			FILED	
DOCUMENT # L02000012228				
1. Entity Name TEAK ANTIQUE FURNITURE, LLC	пе			3 PM 2: 22
· ·			SECRETAR	Y OF STATE EE, FLORIDA
Principal Place of Business	Mailing Address		IALLANASS	EE' LEOUINÀ
880 N. FEDERAL HWY Boca Raton, Fl 33432	20961 Boca Raton, FL 33428			
2000 M 1010; TE 33432 2000 M 1010; TE 33420			1 159HSH AN SOUR HSU PAIN APEN TO	
Principal Place of Business 3. Mailing Address				
20761 Woodsoning Avenue 20961 Woodsome Avenue				
Suite, Apt. #, etc. 0			04012005 REIN-LLC	CR2E101 (6/04)
City & State	Sity & State		4. FEI Number	Applied For
Doca Katson, LC	Boca Ration, FL		01-0698950	Not Applicable
Zip Country	33428	Country	5. Certificate of Status Desired	S5.00 Additional Fee Required
	6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
JŌNES, STANLEY				
20961 WOODSPRING AVE.		Street Address	Street Address (P.O. Box Number is Not Acceptable)	
BOCA RATON, FL 33428				
		City		FL Zip Code
8. The above named entity submits this Alternant for	the purpose of changing its re-	nistered office or registe	red agent, or both, in the State of Fl	!
8. The above named entity submits this paper and to 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 Signature, typed or printed name of registered agent and told if applicable. (NOTE: Registered Agent signature required when reinstating)				
Signature, typed or printed name of registering argent w	по гле п аррисаоне. (NOTE: Н	registered Agent signature redu	ired when reinstitting)	- DAGE
FILE NOW!!! FEE IS \$200.00			ke check payable to a Department of State	
9. MANAGING MEMBER	RS/MANAGERS	10.	ADDITIONS	/CHANGES
TITLE P NAME JONES, MONICA	Delete	TITLE		☐ Change ☐ Addition
STREET ADDRESS 20961 WOODSPRING AVE		NAME Street address		
CITY-ST-ZIP BOCA RATON, FL 33428		CITY-ST-ZIP		
TITLE S NAME JONES, STANLEY	☐ Delete	TITLE NAME		
STREET ADDRESS 20961 WOODSPRING AVE	SSS 20961 WOODSPRING AVE STREET ADDRESS		WSTATEMENT OT OF	
CITY-ST-ZIP BOCA RATON, FL 33428	<u></u>	CITY-ST-ZIP	1000	
T TAME JONES, JAMIE	☐ Delete	TITLE 3	Am Contraction of	☐ Change ☐ Addition
STREET ADDRESS 20961 WOODSPRING AVE		STREET ADDRESS		
CITY-ST-ZIP BOCA RATON, FL 33496		CITY-ST-ZIP	- 05/20/20/5/5	3788U1
THILE NAME	☐ Delete	TITLE NAME	opitionop. Ataci	6002 ##### - 40 Addition
STREET ADDRESS		STREET ADDRESS		
CITY-ST-ZIP		CITY-ST-ZIP		
TITLE NAME	☐ Delete	TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS		
CITY-ST-2IP		CITY-ST-ZIP		
TITLE NAME	☐ Delete	TITLE NAME		☐ Change ☐ Addition
STORET ADDRESS		STREET ADDRESS		
CITY-ST-ZIP				
in the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Flurther certify that the information in the information in the information in the 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 an equired by Chapter 608, Florida Statutes.				
minical matrices of the receiver of trustees inported to execute this report of required by ortapies and, Fibrida Statistics.				
	2/			, ,
SIGNATURE:			4-5-05	561-482-3059