

# 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L02000017116

1. Entity Name  
AMADAN, L.L.C.



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

06 OCT 31 PM 4:43

Principal Place of Business  
11844 LAKE SHORE PLACE  
NORTH PALM BEACH, FL 33408

Mailing Address  
11844 LAKE SHORE PLACE  
NORTH PALM BEACH, FL 33408



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

10262006 REIN-LLC CR2E101 (11/05)

4. FEI Number  
46-0490150

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

## 6. Name and Address of Current Registered Agent

AHR, DAVID J JR.  
71 ADMIRALS COURT  
PALM BEACH GARDENS, FL 33418

## 7. Name and Address of New Registered Agent

Name David J. Ahr, Jr.  
Street Address (P.O. Box Number is Not Acceptable)  
11911 US Highway One  
Suite 201  
City N. Palm Beach FL Zip Code 33408

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

David J. Ahr, Jr.

(NOTE: Registered Agent signature required when reinstating)

10/26/06

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After January 1, 2007, Fee will be \$200.00**

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

## 9. MANAGING MEMBERS/MANAGERS

TITLE MGRM ☐ Delete  
NAME AHR, MARTHA K  
STREET ADDRESS 11844 LAKE SHORE PLACE  
CITY-ST-ZIP NORTH PALM BEACH, FL 33408

TITLE MGRM ☐ Delete  
NAME AHR, DAVID J JR.  
STREET ADDRESS 71 ADMIRALS COURT  
CITY-ST-ZIP PALM BEACH GARDENS, FL 33418

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 10. ADDITIONS/CHANGES

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 800081388798  
CITY-ST-ZIP 10/31/06--01053--004 \*\*150.00

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**REINSTATEMENT**

2006

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 608, Florida Statutes.

SIGNATURE:

David J. Ahr, Jr. DAVID J. AHR, JR.

10/26/06 (561) 622-2794

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #