

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000005559

FILED
Nov 26, 2005
Secretary of State

Entity Name: RATT BATTALION SECURITY ENFORCEMENT UNIT L.L.C.

Current Principal Place of Business:

5211 NW 17 TH AVENUE
MIAMI, FL 33142

New Principal Place of Business:

214 N.E. 164TH STREET
MIAMI, FL 33162

Current Mailing Address:

214 NE 164TH STREET
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

214 N.E. 164TH STREET
MIAMI, FL 33162

FEI Number: 05-0555186 **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:

SPENCE, CHRISTOPHER G SR
214 NE 164TH STREET
NORTH MIAMI BEACH, FL 33162 US

Name and Address of New Registered Agent:

SPENCE, CHRISTOPHER G SR
214 N.E. 164TH STREET
MIAMI, FL 33162 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: MAJOR SPENCE, CHRISTOPHER G SR.

11/26/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CHRISTOPHER, SPENCE
Address: 214 N.E. 164 STREET
City-St-Zip: N.M.B., FL 33162

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MAJOR SPENCE, CHRISTOPHER G
Address: 214 N.E. 164 STREET
City-St-Zip: MIAMI, FL 33162

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: MAJOR SPENCE, CHRISTOPHER

MGRM

11/26/2005

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