

# 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000010597

Entity Name: X.P.T. LLC

FILED  
Sep 23, 2006  
Secretary of State

## Current Principal Place of Business:

2495 SW 82ND AVE.  
SUITE 202  
DAVIE, FL 33324

## New Principal Place of Business:

5185 S. UNIVERSITY DR  
DAVIE, FL 33328

## Current Mailing Address:

2495 SW 82ND AVE.  
SUITE 202  
DAVIE, FL 33324

## New Mailing Address:

5185 S. UNIVERSITY DR  
DAVIE, FL 33328

FEI Number: 43-2009958      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:

KARGER CONSULTING GROUP LLC  
C/O WILLIAM KARGER  
3003 YAMATO ROAD C-8 #1084  
BOCA RATON, FL 33434 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: WILLIAM KARGER

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: LOUIS, KOULOUVARIS C  
Address: 2495 SW 82ND AVENUE # 202  
City-St-Zip: DAVIE, FL 33324

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: LOUIS, KOULOUVARIS C  
Address: 5185 S. UNIVERSITY DR  
City-St-Zip: DAVIE, FL 33328

Title: MGR ( ) Change (X) Addition  
Name: STEPHANIE, KOULOUVARIS  
Address: 5185 S. UNIVERSITY DR  
City-St-Zip: DAVIE, FL 33324

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: STEPHANIE KOULOUVARIS

MGR

09/23/2006

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