

2004 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000011421

FILED
Dec 09, 2004
Secretary of State

Entity Name: LAS OLAS HOUSE & INVESTMENTS, L.L.C.

Current Principal Place of Business:

6667 NW 110TH WAY
PARKLAND, FL 33076

New Principal Place of Business:

Current Mailing Address:

PO BOX 7667
WEST SAMPLE RD.
CORAL SPRINGS, FL 33065#179

New Mailing Address:

FEI Number: 73-1662554 **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:

Name and Address of New Registered Agent:

TAX HOUSE CORPORATION
3929 N FEDERAL HWY.
POMPANO BEACH, FL 33064 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: CULLIN, THOMAS WALTER
Address: 8971 NW 33RD STREET
City-St-Zip: CORAL SPRINGS, FL 33065

Title: MGR () Delete
Name: LEVINSON, ADAM C
Address: 6667 NW 110TH WAY
City-St-Zip: PARKLAND, FL 33076

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: THOMAS CULLING

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12/09/2004

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