

# **2004 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L03000014721

**FILED**  
**Oct 27, 2004**  
**Secretary of State**

**Entity Name:** CIPHA, LLC

**Current Principal Place of Business:**

1078 PELICAN DR.  
PALM BEACH, FL 33414

**New Principal Place of Business:**

**Current Mailing Address:**

1078 PELICAN DR.  
PALM BEACH, FL 33414

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MOSSOP, ANDREW  
10786 PELICAN DR.  
PALM BEACH, FL 33414 US

**Name and Address of New Registered Agent:**

MOSSOP, ANDREW  
1078 PELICAN DRIVE  
PALM BEACH, FL 33414 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: ANDREW MOSSOP

10/27/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

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

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: MOSSOP, ANDREW MANAGER  
Address: 1078 PELICAN DRIVE  
City-St-Zip: PALM BEACH, FL 33414

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: ANDREW MOSSOP

MGRM

10/27/2004

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