2004 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Nov 30, 2004
Secretary of State

DOCUMENT# L03000015889

Entity Name: LEX D PALMS, LLC

Current Principal Place of Business:

1600 TOWN CENTER BLVD., STE. C
WESTON, FL 33326

New Principal Place of Business:

2110 N OCEAN BLVD
APT. 1802
FT. LAUDERDALE, FL 33305

Current Mailing Address:

1600 TOWN CENTER BLVD., STE. C
WESTON, FL 33326

New Mailing Address:

2110 N. OCEAN BLVD
APT. 1802
FT. LAUDERDALE, FL 33305

FEI Number: 20-1871510 **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:

DESIMONE, ALFRED A
1600 TOWN CENTER BLVD., STE. C
WESTON, FL 33326 US

Name and Address of New Registered Agent:

DESIMONE, ALFRED A
2110 N. OCEAN BLVD
APT. 1802
FT. LAUDERDALE, FL 33305 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: ALFRED A. DESIMONE 11/30/2004
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: DESIMONE, ALFRED A
Address: 1600 TOWN CENTER BLVD., STE. C
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: DESIMONE, ALFRED A
Address: 2110 N. OCEAN BLVD APT. 1802
City-St-Zip: FT. LAUDERDALE, FL 33305

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: ALFRED A. DESIMONE DR. 11/30/2004
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date