

# **2005 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L03000020046

**FILED**  
**Aug 09, 2005**  
**Secretary of State**

**Entity Name:** NORTH PALM BEACH COUNTY PROPERTIES, L.L.C.

**Current Principal Place of Business:**

5334 SAPPHIRE VALLEY  
BOCA RATON, FL 33486

**New Principal Place of Business:**

452 MARBELLA DRIVE  
NORTH PALM BEACH, FL 33403

**Current Mailing Address:**

5334 SAPPHIRE VALLEY  
BOCA RATON, FL 33486

**New Mailing Address:**

452 MARBELLA DRIVE  
NORTH PALM BEACH, FL 33403

**FEI Number:**                      **FEI Number Applied For (X)**                      **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:**

KLINGER, ANSON  
5334 SAPPHIRE VALLEY  
BOCA RATON, FL 33486      US

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

KLINGER, ANSON MANAGER  
452 MARBELLA DRIVE  
NORTH PALM BEACH, FL 33403      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: ANSON KLINGER

08/09/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

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

**ADDITIONS/CHANGES:**

Title:                      MGR                      ( ) Change (X) Addition  
Name:                      KLINGER, ANSON MANAGER  
Address:                      452 MARBELLA DRIVE  
City-St-Zip:                      NORTH PALM BEACH, FL 33403

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: ANSON KLINGER

MGR

08/09/2005

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