

# **2006 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L03000021031

Entity Name: AQOOLA LLC

**FILED**  
**Sep 27, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

1311 WHITNEY ROAD  
ONTARIO, NY 14519

**New Principal Place of Business:**

18727 ARAPAHOE CIRCLE  
PORT CHARLOTTE, FL 33948

**Current Mailing Address:**

1311 WHITNEY ROAD  
ONTARIO, NY 14519

**New Mailing Address:**

18727 ARAPAHOE CIRCLE  
PORT CHARLOTTE, FL 33948

FEI Number: 54-2152488      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

HINDEN, JON A ESQ  
4430 SOUTHWEST 64TH AVENUE  
DAVIE, FL 33314      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: JON HINDEN

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: NARKOW, VICTOR  
Address: 1311 WHITNEY RD  
City-St-Zip: ONTARIO, NY 14519

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change ( ) Addition  
Name: NARKOW, VICTOR  
Address: 18727 ARAPAHOE CIRCLE  
City-St-Zip: PORT CHARLOTTE, FL 33948

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: VICTOR NARKOW

MGR

09/27/2006

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