

# **2005 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L03000024014

Entity Name: EMEDS RESOURCES LLC

**FILED**  
**Jan 19, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

1940 N. COMMERCE PARKWAY  
WESTON, FL 33326

**New Principal Place of Business:**

5510 CASTLEGATE AVE.  
DAVIE, FL 33331

**Current Mailing Address:**

1940 N. COMMERCE PARKWAY  
WESTON, FL 33326

**New Mailing Address:**

5510 CASTLEGATE AVE.  
DAVIE, FL 33331

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

NAVARRO, RENE  
1801 CORAL WAY #204  
MIAMI, FL 33145 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: RENE NAVARRO

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: CASAL, GEORGINA  
Address: 1940 N. COMMERCE PARKWAY  
City-St-Zip: WESTON, FL 33326

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: CASAL, GEORGINA  
Address: 5510 CASTLEGATE AVE.  
City-St-Zip: DAVIE, FL 33331

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: GEORGINA CASAL

MGR

01/19/2005

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