

# **2006 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L03000029497

Entity Name: MANNY, LLC

**FILED**  
**Oct 17, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

435 NORTH HARBOR CITY  
MELBOURNE, FL 32935

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 805  
SADDLE RIVER, NJ 07458

**New Mailing Address:**

FEI Number: 11-3699669      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:**

RAMIREZ, MANUEL  
106 WEST BAY DR.  
COCOA BEACH, FL 32931      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: MANUEL RAMIREZ

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

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: RAMIREZ, MANUEL  
Address: 12 HIGH MEADOW RD. NORTH  
City-St-Zip: SADDLE RIVER, NJ 07458

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MANUEL RAMIREZ

MGR

10/17/2006

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