

2004 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000032230

FILED
Oct 07, 2004
Secretary of State

Entity Name: WESTON WOOD FLOORS LLC

Current Principal Place of Business:

3877 TURTLE RUN BLVD., #2221
CORAL SPRINGS, FL 33067

New Principal Place of Business:

390 RACQUET CLUB ROAD
APT 105
WESTON, FL 33326 US

Current Mailing Address:

3877 TURTLE RUN BLVD., #2221
CORAL SPRINGS, FL 33067

New Mailing Address:

390 RACQUET CLUB ROAD
APT 105
WESTON, FL 33326 US

FEI Number: 20-0296964 **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:

SARRIA, ALFREDO A.F.
3877 TURTLE RUN BLVD., #2221
CORAL SPRINGS, FL 33067 US

Name and Address of New Registered Agent:

FOGUEL, ALFREDO A.
390 RACQUET CLUB ROAD
APT 105
WESTON, FL 33326 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: ALFREDO A. FOGUEL

10/07/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: SARRIA, ALFREDO A.F.
Address: 3877 TURTLE RUN BLVD., #2221
City-St-Zip: CORAL SPRINGS, FL 33067

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FOGUEL, ALFREDO A.
Address: 390 RACQUET CLUB ROAD
City-St-Zip: WESTON, FL 33326

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: ALFREDO A. FOGUEL

MGRM

10/07/2004

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