

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000032526

Entity Name: TENOR, LLC

FILED  
Mar 19, 2009  
Secretary of State

## Current Principal Place of Business:

C/O A.I. BOYMELGREEN  
3050 BISCAYNE BLVD., SUITE 700  
MIAMI, FL 33137

## New Principal Place of Business:

C/O AFRICA ISRAEL OF FLORIDA  
3050 BISCAYNE BLVD., SUITE 700  
MIAMI, FL 33137

## Current Mailing Address:

C/O A.I. BOYMELGREEN  
3050 BISCAYNE BLVD., SUITE 700  
MIAMI, FL 33137

## New Mailing Address:

C/O AFRICA ISRAEL OF FLORIDA  
3050 BISCAYNE BLVD., SUITE 700  
MIAMI, FL 33137

FEI Number: 20-0581516

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

PENABAD, CORALEE G ESQ  
3050 BISCAYNE BLVD, SUITE 700W  
MIAMI, FL 33137 US

## Name and Address of New Registered Agent:

TZINDLER, MAYA  
3050 BISCAYNE BLVD, SUITE 700  
MIAMI, FL 33137 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: MAYA TZINDLER

03/19/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: OLYMPIA FLORIDA LLC,  
Address: 700 PACIFIC STREET  
City-St-Zip: BROOKLYN, NY 11217 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: OLYMPIA FLORIDA LLC,  
Address: 229 WEST 43RD STREET  
City-St-Zip: NEW YORK, NY 10036 US

I hereby certify that the information supplied with this filing does not qualify 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: TAMIR KAZAZ, AUTHORIZED SIGNATORY

MGRM

03/19/2009

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