

# **2005 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L03000032708

Entity Name: LDS, LLC

**FILED**  
**Mar 29, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

7000 W. PALMETTO PARK RD, STE. 402  
BOCA RATON, FL 33433

**New Principal Place of Business:**

317 NE 2ND STREET  
BOCA RATON, FL 33432

**Current Mailing Address:**

7000 W. PALMETTO PARK RD, STE. 402  
BOCA RATON, FL 33433

**New Mailing Address:**

317 NE 2ND STREET  
BOCA RATON, FL 33432

FEI Number: 36-4538374      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:**

GREENFIELD, STEVEN B ESQ  
7000 W. PALMETTO PARK RD, STE. 402  
BOCA RATON, FL 33433      US

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

GOODRIDGE, STEPHEN C  
317 NE 2ND STREET  
BOCA RATON, FL 33432      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: STEPHEN GOODRIDGE

03/29/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: GOODRIDGE, STEPHEN C  
Address: 317 NE 2ND STREET  
City-St-Zip: BOCA RATON, FL 33432

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: STEPHEN GOODRIDGE

MGRM

03/29/2005

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