

# **2005 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L03000033809

Entity Name: ALBRICAS, LLC

**FILED**  
**Jan 10, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

1157 SAWGRASS CORPORATE PKWY.  
SUNRISE, FL 33323

**New Principal Place of Business:**

530 SAWGRASS CORPORATE PKWY  
SUNRISE, FL 33325

**Current Mailing Address:**

1157 SAWGRASS CORPORATE PKWY.  
SUNRISE, FL 33323

**New Mailing Address:**

530 SAWGRASS CORPORATE PKWY  
SUNRISE, FL 33325

FEI Number: 59-3187373

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BSPA CORPORATE SERVICES, INC.  
350 EAST LAS OLAS BLVD., STE. 1000  
FORT LAUDERDALE, FL 33301 US

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

PROTECTIVE PRODUCTS INTERNATIONAL  
530 SAWGRASS CORPORATE PKWY  
SUNRISE, FL 33325 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: DELIA AMADOR

01/10/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

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

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: GIORDANELLA, STEPHEN G  
Address: 530 SAWGRASS CORPORATE PKWY  
City-St-Zip: SUNRISE,, FL 33325

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 G. GIORDANELLA

MGRM

01/10/2005

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