

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000038792

FILED
Jun 29, 2007
Secretary of State

Entity Name: FIRST OVERSEAS BUSINESS AND FINANCE, LLC

Current Principal Place of Business:

17100 COLLINS AVENUE
SUITE 205-206
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

19380 COLLINS AVE
UNIT 1621
SUNNY ISLES BEACH, FL 33160

Current Mailing Address:

17100 COLLINS AVENUE
SUITE 205-206
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

19380 COLLINS AVE
UNIT 1621
SUNNY ISLES BEACH, FL 33160

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

RICHARD A. ARONSKY, P.A.
17100 COLLINS AVENUE
SUITE 205-206
SUNNY ISLES BEACH, FL 33160 US

Name and Address of New Registered Agent:

RICHARD ARONSKY
17100 COLLINS AVENUE
SUITE 205-206
SUNNY ISLES BEACH, FL 33160 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: RICHARD ARONSKY

06/29/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LAPORTE, ERIC
Address: 17100 COLLINS AVENUE, SUITE 205-206
City-St-Zip: SUNNY ISLES BEACH, FL 33160

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LAPORTE, ERIC
Address: 19380 COLLINS AVE UNIT 1621
City-St-Zip: SUNNY ISLES BEACH, FL 33160

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: ERIC LAPORTE

MGRM

06/29/2007

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