

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000039907

Entity Name: KIDABILITIES, LLC

FILED
Oct 26, 2006
Secretary of State

Current Principal Place of Business:

8400 N. UNIVERSITY DRIVE
SUITE 215
TAMARAC, FL 33321

New Principal Place of Business:

5651 NW 29TH STREET
MARGATE, FL 33063

Current Mailing Address:

8400 N. UNIVERSITY DRIVE
SUITE 215
TAMARAC, FL 33321

New Mailing Address:

5651 NW 29TH STREET
MARGATE, FL 33063

FEI Number: 26-0076775 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:

BASS, MICHAEL R ESQ.
600 S. ANDREWS AVENUE, 6TH FLOOR
FT. LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

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: MICHAEL BASS

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: STEIN, FRAN SHECHTE
Address: 8400 N. UNIVERSITY DRIVE
City-St-Zip: TAMARAC, FL 33321

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: STEIN, FRAN SHECHTE
Address: 5651 NW 29TH STREET
City-St-Zip: MARGATE, FL 33063

I hereby certify that the information supplied with this filing does not qualify for the 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: FRAN SHECHTER STEIN

MNGR

10/26/2006

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