

# 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000043950

FILED  
Jan 16, 2006  
Secretary of State

Entity Name: BAJA SESSIONS LLC

## Current Principal Place of Business:

462 BOUCHELLE DRIVE  
#201  
NEW SYMERNA, FL 32169 US

## New Principal Place of Business:

## Current Mailing Address:

2 MATTHEW PLACE  
MAHWAH, NJ 07430 US

## New Mailing Address:

FEI Number: 38-3692029      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:

## Name and Address of New Registered Agent:

LEGALZOOM NEVADA INC  
44 W. FLAGLER ST.  
SUITE 675  
MIAMI, FL 33130 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: JOHN P. HUGHES

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: HUGHES, JOHN P JR.  
Address: 462 BOUCHELLE DRIVE, #201  
City-St-Zip: NEW SYMERNA, FL 32169 US

Title: MGRM ( ) Delete  
Name: HUGHES, JOHN P  
Address: 462 BOUCHELLE DRIVE, #201  
City-St-Zip: NEW SYMERNA, FL 32169 US

Title: MGRM ( ) Delete  
Name: HUGHES, JOSEPH T  
Address: 462 BOUCHELLE DRIVE, #201  
City-St-Zip: NEW SYMERNA, FL 32169 US

Title: MGRM ( ) Delete  
Name: ANGILLET, JOSEPH  
Address: 462 BOUCHELLE DRIVE, #201  
City-St-Zip: NEW SYMERNA, FL 32169 US

Title: MGRM ( ) Delete  
Name: FINCHAM, PETER  
Address: 462 BOUCHELLE DRIVE, #201  
City-St-Zip: NEW SYMERNA, FL 32169 US

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JOHN P. HUGHES

MM

01/16/2006

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