

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L03000045954

1. Entity Name
MASTER PIECES, LLC



Principal Place of Business
**840 NE 46 CT
FT LAUDERDALE, FL 33334**

Mailing Address
**840 NE 46 CT
FT LAUDERDALE, FL 33334**

2. Principal Place of Business
1464 NW 23 AVE
Suite, Apt. #, etc.

3. Mailing Address
1464 NW 23 AVE
Suite, Apt. #, etc.

City & State
FT LAUDERDALE FL

City & State
FT LAUDERDALE FL

Zip
33311 Country

Zip
33311 Country

FILED
05 APR 13 PM 4:43
**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



04052005 REIN-LLC CR2E101 (6/04)

4. FEI Number
61-1460008

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent
**SEGBERSOL, ERICK
840 NE 46 CT
FT LAUDERDALE, FL 33334**

7. Name and Address of New Registered Agent
Name
SEGBERSOL ERICK
Street Address (P.O. Box Number is Not Acceptable)
1464 NW 23 AVE
City
FT LAUDERDALE FL Zip Code
33311

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **MANAGER** DATE **4/07/05**
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$100.00

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SEGBERSOL, ERICK 840 NE 46 CT FT LAUDERDALE, FL 33334 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SEGBERSOL, ERICK 1464 NW 23 AVE FT LAUDERDALE FL 33311 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR YALAN, EDILBERTO 840 NE 46 CT FT LAUDERDALE, FL 33334 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR YALAN, EDILBERTO 1464 NW 23 AVE FT LAUDERDALE FL 33311 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SEGBERSOL, WILLIAM 840 NE 46 CT FT LAUDERDALE, FL 33334 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SEGBERSOL WILLIAM 1464 NW 23 AVE FT LAUDERDALE FL 33311 <input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify 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 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: DATE **4/07/05** (954) 536-6608
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE