

# **2008 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L03000052742

Entity Name: ABA LLC

**FILED**  
**Jul 03, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

3316 DUCK AVENUE  
KEY WEST, FL 33040

**New Principal Place of Business:**

2997 -A MYRTLE OAK CIRCLE  
DAVIE, FL 33328

**Current Mailing Address:**

3316 DUCK AVENUE  
KEY WEST, FL 33040

**New Mailing Address:**

2997-A MYRTLE OAK CIRCLE  
DAVIE, FL 33328

FEI Number: 20-0498330      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:**

MICHAL, BEN HAYLON  
3316 DUCK AVENUE  
KEY WEST, FL 33040      US

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

SNATE, VARDA  
2997-A MYRTLE OAK CIRCLE  
DAVIE, FL 33328      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: VARDA SNATE

07/03/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: BEN-HAYLON, MICHAL  
Address: 3316 DUCK AVENUE  
City-St-Zip: KEY WEST, FL 33040

**ADDITIONS/CHANGES:**

Title: MGRM      (X) Change      ( ) Addition  
Name: SNATE, VARDA  
Address: 1040 NIELSON STREET #3F  
City-St-Zip: FAR ROCKAWAY, NY 11691

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: VARDA SNATE

MGRM

07/03/2008

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